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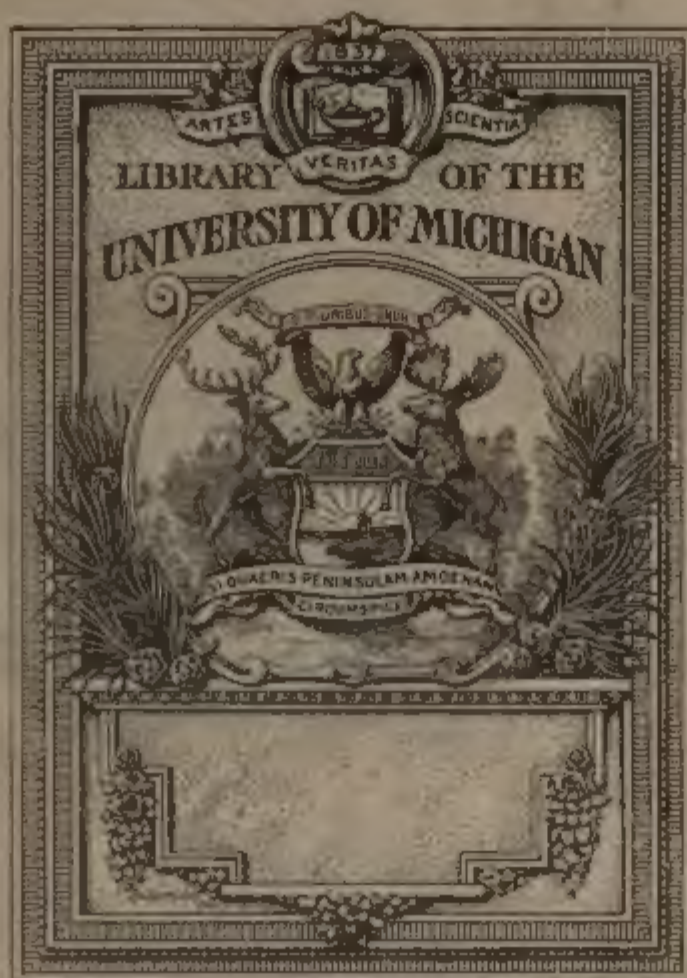
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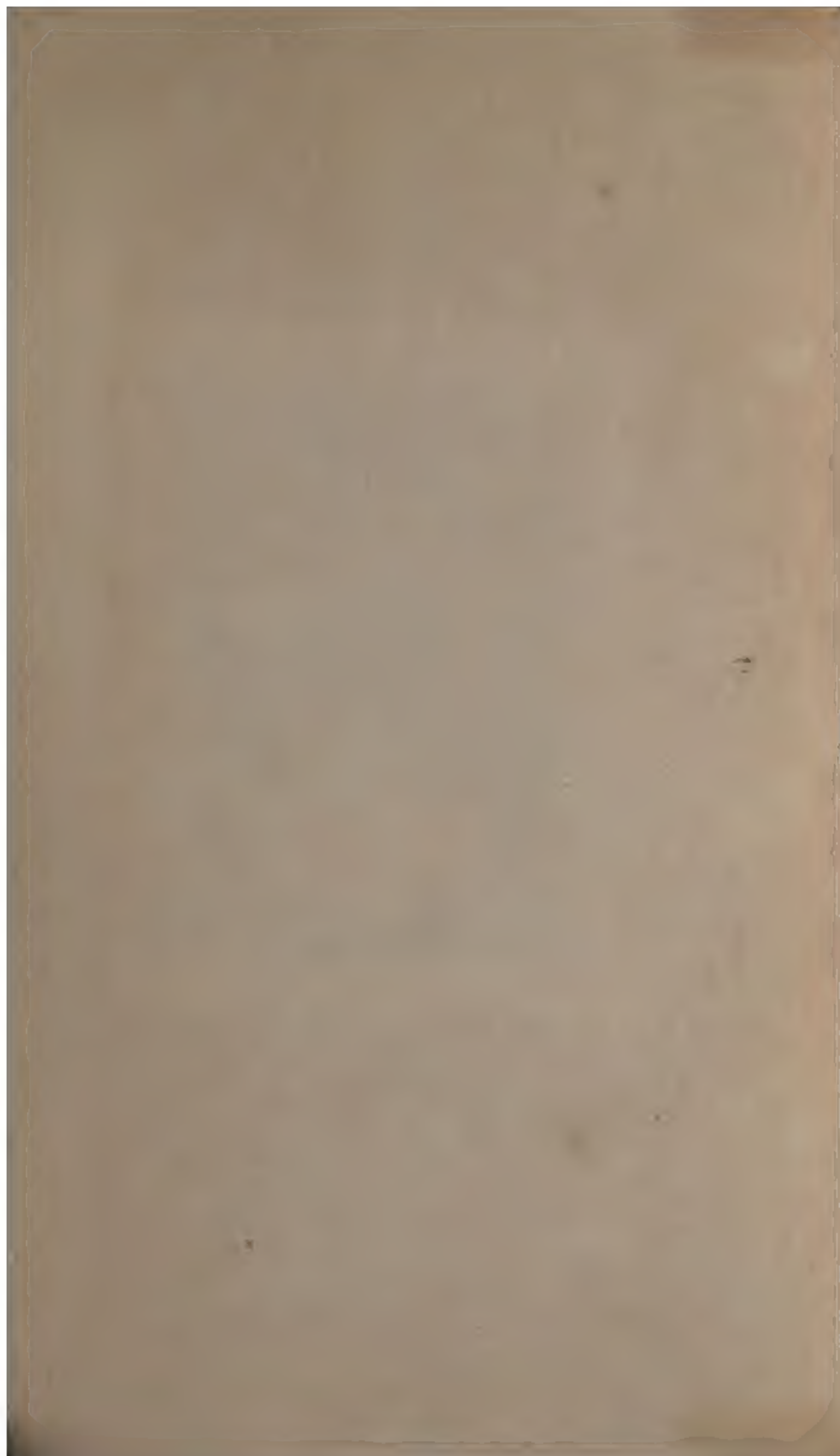
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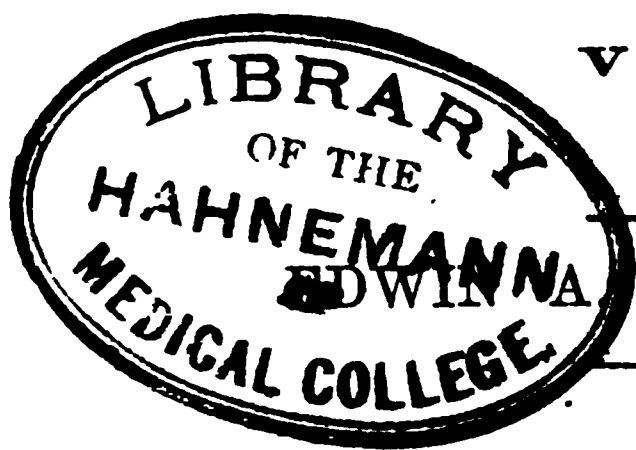
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VOLUME I.

LODGE, M. D., EDITOR.

CONTRIBUTORS:

C. J. HEMPEL, M. D., Michigan,	J. F. MERRITT, M. D., New York,	L. SHAVER, M. D., New York,
E. M. HALE, M. D., Illinois,	THOS. ROWSEY, M. D., Ohio,	C. E. MORSE, M. D., Mass.,
C. NEIDHARD, M. D., Penn'syl'a,	C. C. OLNSTED, M. D., Ohio,	J. E. BROWN, M. D., Iowa,
J. M. LONG, M. D., Michigan,	F. X. SPRANGER, M. D., Mich.,	J. P. BLOSS, M. D., New York,
ASA S. COUCH, M. D., New York,	C. F. CUSHING, M. D., Ohio,	D. J. EASTON, M. D., Wisconsin,
E. H. DRAKE, M. D., Michigan,	E. POTTER, M. D., Illinois,	C. A. LEUTHSTROM, M. D., Wis.,
D. H. MARSDEN, M. D. Penn'a,	G. H. PARKHURST, M. D., N. Y.	H. C. ALLEN, M. D., Canada West,
H. WIGAND, M. D., Ohio,	ALVIN BAGLEY, M. D., Michigan,	L. S. MORGAN, M. D., New York,
J. B. HUNT, M. D., Ohio,	D. B. WHITTIER, M. D., Mass.,	"CONTRIBUTOR BENLASS, U. W.,
A. J. MURCH, M. D., Michigan,	F. A. BENHAM, M. D., Michigan,	S. W. GREEN, M. D., Iowa.

AND OTHERS.

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"Similia, Similibus, Curantur."

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SALUTATORY.

With the new year we send a word of friendly greeting to the practitioners of the most beneficent art of healing—Homœopathy. Permit us to congratulate you on the present position of the science; on the frequent recruiting of your ranks by men of worth and talent from the other schools of practice; that the declensions can hardly count as one where there are a hundred accessions; that our medical schools are flourishing, the Colleges, not graduating physicians fast enough to supply the demands for educated Homœopathic practitioners; that although, unjustly deprived of official recognition in army appointments, opportunity has still been afforded of showing that the mortality under Homœopathic treatment is not one half of that under Allopathic drugging; that its superiority in general practice is demonstrated everywhere, and very generally acknowledged by a respectable proportion of the most refined and intelligent; that your *literature is enriched*

month by month by writings of sterling value, that your journals retain their position, and increase their circulation.

As a candidate for your favor we send you the "Homœopathic Observer." Without interfering with the sphere of the larger journals, we hope to supply a need which has been felt by many Physicians.

We shall not aim to reach the popular ear, but rather strive to present a publication that shall be really useful to the Profession, offering a frequent and accessible medium for communication with the great body of our fraternity in the United States and British Provinces. Correspondence is solicited, and any paper of value to the practitioners of our true art of healing will find a welcome in these columns. Articles advocating the use of the higher potencies, or those recommending the use of the lower exclusively, or others, favoring both, will all be received; and criticisms, regarding high or low dilutions, will always find a place, if not written in a hypercritical spirit. Practical papers will always be preferred to controversial or theoretical. We shall, however, favor the freest interchange of sentiment, opinion and experience, that the cause may be advanced and society benefitted.

Our Physicians are making cures every day with new remedies, or new modes of application of old ones, these are much in advance of the directions of the books, and their publication would add to our knowledge very materially, yet these every-day workers cannot be induced to sit down and prepare comprehensive articles, embracing their experience, fit for publication in a massive quarterly, they shrink from undertaking it in the "Homœopathic Observer" they ha

a medium presenting articles just as brief as they wish. Concise and pertinent remark will always be appreciated, and such are frequently the most suggestive in character. Let those, however, who have leisure and ability send us elaborate essays or long lectures.

The Observer will note whatever appears in the current literature that is likely to interest our physicians. Without depreciating old and well proved medicines, etc., we will endeavor to keep well posted up in relation to new books, new instruments and new remedies. We shall devote particular attention to provings, &c., of our indigenous medical plants.

We propose printing for one dollar per year over one third the amount of matter contained in the three dollar journals. If subscriptions cover the cost of printing, we shall exclude advertisements from the body of the Observer, and insert them in a neat cover that can be thrown aside in binding.

The present number is sent to the practitioners of Homœopathy with the fraternal regards of the publisher. If you desire to support the Observer, please to forward your subscription, and to make it worthy of extensive patronage, *write for it* as frequently as you have matter of interest to communicate.

COMMUNICATIONS.

We have several very interesting communications which we have been obliged to defer until the next number, on account of giving so much space to the report of the Michigan Homœopathic Institute.

MICHIGAN HOMŒOPATHIC INSTITUTE.

Minutes of a meeting of the Michigan Homœopathic Institute, held at Kalamazoo on Wednesday the 23rd of September, 1863.

Present:—Doctors L. M. Jones, A. Bagley, J. D. Craig, John Doy, Smith Rogers, John E. Smith, Orrin Fowle, A. R. Ball, J. R. Hyde, E. S. Roberts, I. N. Eldridge and E. A. Lodge.

Dr. A. Bagley was unanimously chosen President pro. tem.

Roll of members called by the Secretary.

The reading of minutes of previous meeting was, on motion, dispensed with.

The following physicians were admitted to membership by unanimous vote of the Institute: J. D. Craig, M. D., John E. Smith, M. D.; A. Farnsworth, M. D.; Orrin Fowle, M. D.; A. R. Ball, M. D.; S. N. Coons, M. D.

A paper on the "Homœopathic Law of Cure" by J. M. Long, M. D., was read and ordered to be placed upon the files for consideration.

Dr. Bagley of committee on Diphtheria, said that he was not prepared to present a written report on this disease, but would state verbally that he believed there was a lack of definite knowledge concerning its pathology. Was not the disease misnamed diphtheria? The deposit does not always occur. In some of the most fatal cases all the phenomena of the disease are present except the deposit. Was not the deposit a mere symptom of the disease itself? He considered that it was a constitutional malady. Four remedies had been prescribed by him with good success—Belladonna, Proto-iodide Mercury, Tartar emetic and Arsenicum. He wished to elicit discussion on the subject.

Dr. John Doy stated that he had treated but four or five cases of true diphtheria during the last two years. These he attended closely, administering Aconite and Belladonna, second of each alternately every two hours. Inflammatory symptoms soon subsided then he prescribed Hepar sulphur, Mercurius vivus and sometimes Biniodide of Mercury, second attention of each, every two hours. These means were successful in every case. He stated his surprise that there were no reports of Laryngitis, Tonsillitis or Gangrenous angina now—every throat case was called diphtheria.

Dr. J. D. Craig had treated many cases with invariable success using Tincture of Aconite root and Belladonna at first, then Belladonna and Biniodide Mercury second; Bichromate of Potash was also used.

Dr. I. N. Eldridge related the treatment

of seven cases—three of which came under his treatment before he had ever heard of such a disease as Diphtheria. They occurred just previous to the reports of that malady as it appeared in Albany, N. Y. The three cases occurred in the same family; the first was a little boy of two years,—had a violent chill followed by high fever, sore throat with rigidity of jaws so that the teeth could not be separated to the extent of half an inch, this circumstance prevented an examination of the throat, he had rattling respiration, great fetor of breath with a constant discharge of a soapy offensive mucus from the nostrils and corners of the mouth. Prescribed *Acon. Bell. and Tart-emet* all of second attenuation, these remedies subdued the fever and relieved in a great measure the breathing and secretion and flow of mucus. By this time two other members of the family were taken with chill, followed by a high fever with sore throats; on examination, found great redness and a leathery membrane covering almost the entire throat, with fetor of breath. This state of things led him to believe the first one attacked had the same membranous formation, and he was at once put upon *Merc. Sol, Hepar* and *Spongia*—while the two last were put upon *Acon. and Bell.* every half hour until the fever abated and then were given *Merc. and Hepar Sol.* to the end of the cure, which occurred on the 7th day from the onset. But the first one attacked did not terminate so favorably at first, but when the local disease seemed to have been entirely removed, he was troubled with strabismus, inarticulate speech with stammering, and a partial paralysis of the lower limbs, which was, however, cured at the end of four weeks after the disappearance of the local disease under the influence of *Nux Vomica, Bell. and Hyos.* The cases were put upon *Merc. Hepar and Spongia* because he thought they presented symptoms more nearly allied to croup than any other disease—although there were no croup symptoms except the fever and the membrane lining the throat. A few days after these cases were discharged, he received a Homœopathic Medical Journal from New York, giving a history of an epidemic in Albany proving fatal in most instances under Old

School treatment called Diphtheria, the similarity between the cases and those he had just been treating, he became satisfied at once that he had been treating Diphtheria without having the knowledge that such a disease had an existence. These cases, however, prove the beauty and superiority of our system over the Old School in treating the symptoms as they are developed instead of treating a disease by its pathological name.

The other four cases occurred the present season. The first of them was a farmer, living five miles out of the city, about 32 years of age, hæmasthenic temperament—who had lost a brother and two sisters lately with consumption, and who had himself just made the tour of Oregon and California for the benefit of his health, being as was supposed consumptive. He had an acute attack of Angina in San Francisco but a few weeks previous, and his tonsils excised. Soon after he returned home to his family, he was seized suddenly with a heavy chill followed by high fever, pulse 130 with great excitement of the arterial system, determination of blood to the head, sore throat with external swelling and stiffness of the jaws; he saw him within a few hours after the attack set in on examination of the throat, it was found dotted here and there with small dirty grey patches of membrane with very great foetor of breath. He was put immediately upon *Acon. Bell. and Apis Mel.* all in the first decimal alternately every half hour on his visit, the next day his fever had abated in a great measure, pulse 100, but the membrane in the throat had increased, becoming confluent and covered the entire throat, tonsils and all. He was now put upon *Proto-Iodide of Mer. 2nd decimal trit. and Bell.* alternately every half hour. On visiting his patient the next day he found no improvement, but on the contrary the breathing was now becoming rather labored, but the throat appearance about the same, he was now put upon *Kali bich. and Bell.* first alternately every half hour, with a powder of the Arsen. 4th, once in six hours. On his visit the next day he found that the patient, soon after taking the Kali Bich. began to throw up small pieces of the membrane

and on examination the membrane had the appearance of undergoing a state of disorganization, patient said he felt better, could breathe easier, pulse 94—continued the same remedies and on the fourth day from the administration of the *Kali Bich*, the last vestige of the membrane had disappeared from the throat, and on the 10th day, patient was discharged, although several weeks elapsed before he fully recovered his strength. The other three cases were the children of this man, aged respectively 2, 4 and 6 years, the two eldest, girls, and were all taken about the same time, about twelve days from the first day of the father's attack. They all commenced with the characteristic chill and fever with sore throat, external swelling and foetor of breath, he saw all three of them the next day after the attack, and upon examination of the throat they all had the diphtheritic appearance with irregular dots of the membrane not larger than a pins head. They were all put upon *Acon.* and *Bell.* alternately, every half hour, to take *Bich.* as soon as the fever abated, if the exudation and formation of membrane increased. On his next visit, two days after, the two youngest had so much improved as to be playing about the room, the mother remarked the dots in the throat had increased to the size of peas, but that they had all disappeared after taking the *Kali. Bich.* The eldest, however, presented quite a different appearance. She not only had fever yet, but the leathery membrane nearly covered the throat. She was kept under the *Acon. Bell. and Kali Bich*, alternately every hour, the *Acon. and Bell.* in water, and *Kali* in grain powders dry on the tongue of the 2d dec. trit. The father was so sanguine that his medicine was going to cure this case, that he thought it would not be necessary for him to make another visit, but that he would call at his office and report the case and obtain more medicine if necessary. He urged upon him the critical nature of this disease, and cautioned them to give the child all the nourishment it would take, beef tea in particular. He heard nothing further from this case for eight days, when he was hastily summoned to go and see the

child at once. He found on his arrival, the patient's pulse 150, and scarcely perceptible, no fever, internal throat no trace of disease perceptible, face puffed, lips blanched, and every appearance of approaching dissolution. Patient had passed no urine for fifteen hours, no fullness or tenderness over the region of the bladder. He learned from the parents that after his last visit the membrane had all been thrown off, the fever left, and the child felt inclined to go about with the other children, and was allowed to do so for several days, in the yard, about the house, and not till this day did she show symptoms of being any worse, although during all this time she had no appetite, and took but very little nourishment—a little toast. He now gave the patient *Cantharis and Arsenicum and Carb Veg.* The remedies failed to accomplish any good, and she calmly expired without a struggle in about ten hours. He was satisfied that if this case could have had professional attention during those eight days, she might have recovered also. She needed stimulating diet, and perhaps tonic treatment.

It was his opinion, based upon his experience, that *Acon. and Bell.* in the febrile, or inflammatory stage, and *Kali Bichrom* for the disorganization and expulsion of the membrane, with *Ars.* as a tonic, would cure nearly, if not all cases of diphtheria. In conclusion he inquired why diphtheria caused paralysis of the lower limbs, and also whether diphtheria is a contagious disease.

Dr. L. M. Jones also recommended the China and Arsenicum with Aconite and Belladonna, the third of each of the two last named remedies first, then *Mercureus protoiodatus* in alternation.

Dr. E. A. Lodge related some cases illustrating the curative action of *Gelsemium* in paralysis succeeding diphtheria.

Dr. Smith Rogers remarked that *Gelsemium* was truly homœopathic to such conditions as it had power to induce paralysis.

Dr. Bagley said that he did not consider that the diphtheritic deposit is identical with the false membrane of croup. He prescribes 3d decimal trituration of *Tartar emetic* in doses as large as can be borne with-

out producing nausea. The protoiodide was his favorite preparation of mercury. He had found cases of diphtheria, succeeding scarlatina generally fatal.

Dr. Ball found that the physicians had but very few cases of ordinary throat complaints to report. It was all diphtheria. Is the disease increasing, or an incorrect diagnosis made?

The discussion of the subject of diphtheria being closed, Dr. Lodge presented a report on Homœopathic Pharmacy, which was accepted and placed on file.

The Institute then proceeding to an election of officers by ballot, for the ensuing year, the following gentlemen were duly elected:

President—ALVIN BAGLEY, M. D.

Vice President—I. N. ELDRIDGE, M. D.

Secretary—E. A. LODGE, M. D.

Treasurer—J. A. ALBERTSON, M. D.

Censors—SMITH ROGERS, M. D., A. R. BALL, M. D., J. D. CRAIG, M. D., J. A. HYDE, M. D. and L. M. JONES, M. D.

On motion of Dr. Eldridge it was unanimously agreed that the Institute shall meet at Detroit on the second Wednesday of June, 1864.

The President and Secretary, with Doctors John Doy, L. M. Jones and J. R. Hyde, were appointed to select Special Committees to report at the next meeting.

Dr. Bagley was unanimously appointed to deliver the next address.

Adjourned until 9 A. M. of the 24th.

Meeting held on the 24th of September.

The minutes of the last meeting were read and approved.

A communication from Professor Hempel was read and ordered to be placed on file.

The following Special Committees were appointed:

On Publication—Drs. E. A. Lodge, P. H. Hale, G. T. Rand and I. N. Eldridge.

On Professorship in State University—Drs. D. W. Rogers, N. B. Covert, and Wm. Huntington.

On Homœopathic College—Drs. C. J. Hempel, J. M. Long and E. A. Lodge.

On Provings—Drs. E. M. Hale, C. A. Williams, and L. M. Jones.

On Pathology—Drs. E. H. Drake, A. H. Botsford and F. Finster.

On Hygiene—Drs. E. A. Lodge, A. W. Walker and Isaac Douglas.

On Surgery—Drs. E. R. Ellis, A. J. Sawyer, E. H. Drake and Smith Rogers.

On Obstetrics—Drs. A. Walker, A. Bagley, S. W. Pattison and John Doy.

On Medical Electricity—Drs. Joseph Sill, E. L. Roberts and J. A. Albertson.

On Silphium laciniatum—Drs. C. A. Jefferies, J. B. Tuttle and H. C. Bagg.

On Nitrate Uranium—Drs. H. T. Hawley, S. P. Marvin and Lewis Taylor.

On Dose—Drs. C. J. Hempel, J. R. Hyde, I. D. Craig and John E. Smith.

On New Remedies—Drs. A. R. Ball, Orrin Fowle and S. N. Coons.

On Epidemics—Drs. A. H. Botsford, C. J. Covey, John Doy and A. Farnsworth.

On motion it was

Resolved, That the Secretary be authorized to receive new members at any time upon the conditions of the Constitution and By-Laws, and that he send a cordial invitation to all the Homœopathic Physicians of this State, who are not now members, to unite with the organization, and that such new members shall have the privilege of reporting at the next meeting, upon any subject connected with medical science that they may select.

Joseph Sill, M. D., T. Romeyn Huntington, M. D. and Edwin C. Wilber, M. D., were admitted to membership.

Adjourned to meet at Detroit on the second Wednesday of June, (8th June) 1864.

EDWIN A. LODGE, Secretary.

We would invite particular attention to the resolution, which permits the Secretary to receive members at any time. About one half of the Homœopathic practitioners of this State are now members, and it is of great importance that the organization shall include all the Homœopathic Physicians of the State, before the meeting in June. It will be shown at that meeting that there is a work to be accomplished here, which can only be reached through our State Society.

and that the objects sought are worthy of every effort.

Objections have been raised by some that the terms of admission to membership are too strict, by others that they are too lax. It is provided in the Constitution that applicants for membership must be in possession of a diploma or pass an examination before the Board of Censors. This appears to us to be sufficiently liberal, and quite as strict as necessary. The examination by the Board of Censors is not a mere form. Let those who think differently unite with the Society and show us a rule that will be more satisfactory. The Institute will adopt any improvements which are approved by a two-third vote.

PARALYSIS AS A SEQUELA TO DIPHTHERIA.

Paralysis is very frequent, accruing sequela after very obstinate, as well as mild attacks of diphtheria. It has been met with in various forms, especially as paraplegia and local paralysis, but seldom as a general paralysis, of which I had a case this spring.

March 30th, 1863, I was called to attend F. W., male child, two years of age, had taken ill the day previous. On examination I found the case to be one of diphtheria. The exudation of false membrane was not great, still less on the one tonsill than on the other, about one half inch in diameter. The accompanying fever was not very high, and the patient lively and in good spirits. The nostrils were very much obstructed, and the formation of diphtheritic membrane there suspected. I put the child on *Bell.* and *Mercurius bin.*, of the former the 3d centes. and the latter the 2d decimal potency, in alternation every two hours. The general fever as well as the false membrane subsided in a few days, the nostrils were still considerably obstructed, although occasionally a watery discharge would take place. The appetite was nearly normal, but some prostration, peculiar as a consequence to that disease.—The parents did not wish any further attendance, as they supposed the child to have far

enough advanced in recovery, to get along itself. A week later I was called to see the patient again, who was now afflicted with paralysis. The cervical, dorsal and lumbar muscles were paralysed; on raising him upright, his head would drop as that of a person recently dead, his body would bend the same way, under its own weight. This was not owing to prostration, as the child exhibited vigor, and tolerable good color in his countenance. He could move his hands some, though unsafe, lower extremities entirely powerless, could speak, but not very distinct, could swallow very easy, and what appetite he seemed to have was for beer, tongue coated thick and white. Respiration was easy, temperature slightly increased but extremities cold, pulse not hurried and tolerable firm and regular. Bowels and urinary functions normal. I prescribed *Rhu.* 3d, to be taken in water every two hours.—next day no improvement, to the contrary, the patient was getting still worse, for two days further I gave *Ferrum acet.*, *China* and *Arsenic.* until the third day, in the evening, I visited my patient, his skin was pale and transparent like wax, pulse small, fluttering and irregular, extremities cold and covered with a clammy sweat. Pectoral muscles also paralysed, which caused respiration to be abdominal, occasionally he would take a deep sigh, accompanied by a rattling sound in the bronchia. Paralysis of the lungs was now taking place rapidly. I prescribed *Antimon tartart.* one half grain of the pure into a tumbler full of water, of which a teaspoonful was to be given every fifteen minutes. I then left the patient, not expecting to see him alive on my next visit. Next morning I found my patient sitting upright in his bed, with a piece of bread in his hands. The paralysis of the pectoral and spinal muscles had ceased entirely. After taking the first dose of medicine, the child soon fell into a sound sleep, from which he did not awaken for a few hours. The appetite was soon restored. The lower extremities remained incontrollable for a few weeks, There was a very purulent discharge. I had given the child *Antimon. tart.* for a week continually, when was withdrawn from treatment

A few weeks afterwards I saw him when he was perfectly well

F. X. SPRANGER, M. D.

NEW HOMŒOPATHIC PROVINGS.

On the necessity for a volume of Provings of New and Indigenous Remedies, by E. M. HALE, M. D., Professor of Materia Medica and Therapeutics in Hahnemann Medical College, Chicago.

The adherents of the Homœopathic School of medicine in this country, need not be reminded of the fact, that nearly all the remedies from the vegetable kingdom which they use in practice, are natives of another hemisphere. The medical plants principally proven by Hahnemann and his colleagues are indigenous to Europe, and most of them are confined to the German States. It is well known, also, that the medical flora of the Western Hemisphere is peculiarly rich and abundant. Even the medical plants of the United States alone equal in number and power of action, those of the whole continent of Europe. Some of the best minds in the Allopathic profession have appreciated the above fact, and have endeavored to introduce into their Materia Medica some of the most valuable. I will instance the labors of Professors Tully, Chapman, Lee and Paine. The high estimation in which these gentlemen held Sanguinaria, Cimicifuga, Cornus florida, and Podophyllum is evidence of their therapeutical importance.

The use of our indigenous remedies, has almost given rise to new schools of practice in this country. First came the Botanics, under the leadership of such men as Thompson, Howard, and Beach, but they were men of one idea, and their system soon disappeared under the flood of Lobelia and Capsicum with which they deluged their unhappy patients.

Next came the Eclectic school under the leadership of the really gifted Morrow, aided by Jones, Sherwood, King and Cleveland, who have done good service in introducing native remedies into practice. But these men, however good their intentions may have been, have not given us much knowl-

edge of the actual physiological effects of these remedies. Imbued with the crude notions of Allopathic Medicine they have classified them as purgatives, alteratives, &c., and used them according to fanciful theories, or purely empirical deductions.

It remains for the Homœopathic School to give the medical world correct and scientific information relative to the action of these valuable agents.

By applying the method of proving drugs taught us by Hahnemann, and improving that method by all the appliances of modern physiological study, chemical analysis, and pathological observations, we shall be able to point out to the medical world not only the true sphere of action of these remedies new to our school but to get exhaustive pathogenesis, which shall make the indigenous plants, growing in such profusion around us, equal perhaps to many of our highly valued polychrests.

We have now excellent provings of Apocynum, Cimicifuga, Iris and Phytolacca, Podophyllum, Sanguinaria and some others. We have also suggestive fragmentary provings of Asclepias tuberosa, and Syriaca, Baptisia tinc, Erigeron, and Caulophyllum, Nuphar advena, Hydrastis and many others. Some of our school who are not content to be drones in the profession, are laboring to perfect these provings.

I am sorry to add here that some under the lead of Hering, who believe that all the good in Homœopathy will die with them, are inclined to discourage the new provings; and ridicule the use of new remedies in disease.

They have fallen into a spiritless routine of practice, and are content to continue the exclusive use of the old polychrests and anti-psorics, and would rather let their dropsical patients die under the use of Hellebrus, Arsenicum, etc., than to resort to such "new fangled" remedies as Apocynum, Asclepias syr., or Eupatorium pur. We cannot imagine any reason for such a bigoted course, unless it is because they had not the honor of proving the latter remedies, and in the 30th potency!

It will be the aim of the writer to labor

earnestly to fill the want of the profession, by giving to physicians, as soon as possible, through his enterprising publisher—Dr. Lodge, a volume of provings, with as copious clinical observations, relating to many of the new and indigenous remedies, as he can collect.

Those of the Homœopathic School who have used such remedies successfully, or have in their possession fragmentary provings, and clinical notes are earnestly solicited to forward them without delay, to the writer.

Chicago. Box 550.

The work referred to in the above article, will consist of reliable PROVINGS, CLINICAL NOTES and PRACTICAL OBSERVATIONS, respecting a large number of very reliable and important remedial agents, *with specific indications for their strictly Homœopathic application*. It is being prepared to meet the demand among Homœopathic Physicians for reliable information concerning the following medicines:

ATROPINE,
ÆSCULUS HIPPOCASTANUM,
ALETRIS FARINOSA,
APOCYNUM CANNABINUM,
ARUM TRIPHYLLUM,
BAPTISIA TINCTORIA,
CAULOPHYLLUM THALICTROIDES,
COLLINSONIA CANADENSIS,
CORNUS FLORIDA,
CORNUS SERICEA,
CYPRIPEDIUM,
DIOSCOREA VILLOSA,
ERYNGIUM AQUATICUM,
ERIGERON CANADENSIS,
EUPHORBIA CORALLATA,
ERGOTINE,
EUPATORIUM AROMATICUM,
EUPATORIUM PEFOLIATUM,
EUPATORIUM PURPUREUM,
GELSEMINUM SEMPER VIRENS,
GOSSYPIMUM,
HAMAMELIS VIRGINICA,
HELONIAS DIOICA,
HYDRASTUS CANADENSIS,
IRIS VERSICOLOR,
LEPTANDRIA VIRGINICA,
MACROTYS RACEMOSA,
NITRATE OF URANIUM,
PHYTOLACCA DACANDRA,
PODOPHYLLUM PELTATUM,
SILPHIUM LACINIATUM,
SENECIO,
SABBACENIA VARIOLARIS,

SANGUINARIA CANADENSIS,
TRILLIUM PENDULUM,
VERATRUM VIRIDE,

Physicians, are especially requested to forward their contributions for this volume.—Articles containing provings, fragmentary provings, clinical observations, or notes or details of cases treated with any of the medicines referred to, will be thankfully received and due credit given in the work for every such contribution.

Contributions, &c., will be sent to the Editor,

E. M. HALE, M. D.,
124, South Clark Street,
Chicago, Illinois.

It is proposed to make an 8 vo. volume, bound and furnish to subscribers at \$2.00 non subscribers \$2.50.

Subscribers will please send their names and subscriptions to

DR. LODGE, HOMŒOPATHIC PHARMACY,
No. 266, Jefferson Avenue,
Detroit, Michigan.

ATROPINE.

DR. PARISOT, in a paper addressed to the Academy of Sciences, states that he dissolved five centi grammes (one grain) of Atropine in twenty grammes (five drachms) of chloroform; he then steeped cotton in the solution and applied it to the forehead of a person; the extension of the pupil became visible after the lapse of three minutes—two minutes later it was complete and equal on both sides—after a quarter of an hour the skin was found to be red and burning. All these symptoms disappeared in the course of an hour. Substituting alcohol for chloroform, the action was greatly retarded, the dilation not taking place until half an hour's application, and the redness and heat of the skin were hardly perceptible. Atropine dissolved in water, slightly acidulated with acetic acid, produced no effect whatever.

Atropine in Chronic Ulcer of the Stomach:

DR. BERNARD BAHR, in his work, "*Die Therapie nach Homœopathischen Grundsätzen*," says:

"ATROPINE.—It may appear strange that a medicine is placed here which has been but

little, nor clearly proved, but its unmistakable favorable effect in this disease compels us to do so. No medicine has such peculiarities, to appease those frightful cardialgic pains of the ulcer of the Stomach, as the sulphate of Atropine, manifold experience has proved that to us. At the same time it is also shown, that this medicine alone is not sufficient to cure the malady entirely, for as a general rule, there only follows a short cessation of the complaints. Therefore, this drug can only be looked upon as an introductory, and intercurring one. The fourth trituration is the lowest that is advisable to prescribe; the third is likely to call up medicinal symptoms. The improvement worked by this medicine is promoted the best by sulphur, the vomiting generally disappears after it.

HAHNEMANN MEDICAL COLLEGE.

The introductory lecture to the fourth annual course of lectures in Hahnemann Medical College was delivered by Prof. E. M. Hale, to a large and attentive audience.

The lecturer opened by welcoming the students in a cordial manner in the name of the faculty. He invoked them to enter upon their studies with receptive minds, from which should be banished all sordid thoughts—all mean ambitions, all preconceived notions, and all prejudices having their origin in the common ideas of life. It was this sublime self-abnegation which ennobled the great founder of Homoeopathy, and enabled him to discover and apply that great truth which gives to that system or medicine its high position as the true art of healing.

The lecturer passed in review the history of the rise of Homoeopathy, the main incidents in the life of Hahnemann, and particularly the origin and formation of the homoeopathic materia medica by the labors of Hahnemann and his co-workers. He showed that a knowledge of the action of drugs upon the healthy organism was but little understood before Hahnemann commenced his investigations, and that a thorough knowledge of such action is absolutely necessary to the physician who would be successful in the treatment of disease.

The importance of drug provings and the manner of instituting such proving were fully explained, also the different ways in which medicinal substances acted upon the living organism. According to the lecturer there are three modes of action, viz: the *mechanical*, *chemical* and *dynamical*. True Homoeopathic remedies acted dynamically and removed disease by affecting the organism in a specific manner, by virtue of their

curative power when given according to the law of *similia*.

The lecturer gave the class his conception of an "Ideal Materia Medica," and urged that such a perfected work might be attained if physicians would devote their energies to the task of investigating the action of medicines. He would have each medicinal substance thoroughly proven on men and animals; all the objective and subjective symptoms recorded with the utmost minuteness, and even lithographic and photographic representations of the various morbid conditions caused by drugs. This he claimed would institute a "Materia Medica" almost perfect in its character, and by its aid, the practitioner would be able to combat all diseases with an assurance that his success would be enhanced and a vast amount of suffering prevented.

The lecture closed with an allusion to the past of Homoeopathy; how, "only forty years ago, that science, as personated by her illustrious discoverer, had to flee before her ruthless enemies, until she found a refuge within the boundaries of the humblest principality of Germany. In the short space of forty years we have achieved a triumph which bodes still more brilliant success. The insignificant little band who first listened to Hahnemann's teachings has increased to tens of thousands; the most intelligent and influential members of every community honor us with their confidence and esteem. We boast of colleges, pharmacies, dispensaries and chartered institutions. Thirty-five years ago the first representative of Homoeopathy, in the person of Dr. Gram landed on our shores, and for years battled alone, unaided, against the fierce opposition waged against him by the all-powerful Allopathic school. Only twenty years ago the president of this college was the sole Homoeopathic physician in this vast city, where now we have two score representatives of Homoeopathy, many of whom will compare favorably with the most scientific members of the profession in the United States.

The college commences its fourth course of lectures with the most flattering prospects. The number of students for the present year will exceed that of any previous one. The faculty as now organized is as follows:

Geo. E. Shipman, M. D., Emeritus professor of Materia Medica and Therapeutics.

A. E. Small, M. D., Professor of Obstetrics and Diseases of women and children.

N. F. Cooke, M. D., Professor of Institutes and Practice of Medicine.

E. M. Hale, M. D., Professor of Materia Medica and Therapeutics.

G. D. Beebe, M. D., Professor of Surgery and Surgical Anatomy.

Reuben Ludlam, M. D., Professor of Physiology and Pathology.

D. A. Colton, M. D., Professor of General and Descriptive Anatomy.

Rodney Welch, A. M., Lecturer on Chemistry and Toxicology.

E. A. Ballard, M. D., Demonstrator of Anatomy.

NEW WORK ON PRACTICE.

We are happy to announce that a new book on the theory and practice of Homœopathy may be looked for in a short time.—The authors are Doctors E. E. Marcy and F. W. Hunt, well known as being abundantly qualified to give a reliable guide to the practitioner. It is announced that the object of this work is to present to the medical profession, and the friends of Homœopathy a comprehensive and intelligible view of the principles and practice of our school, as it is now represented by our best writers and practitioners; to embody, as far as our wide range of subjects will permit, the latest opinions and theories of investigators of every school on pathology and collateral sciences connected with medicine; and to give to all inquirers after advanced scientific truth the opportunity of investigating our principles, and to see them tested by facts, as illustrated in the clinical experience of a large number of reliable observers. A full prospectus of the work, with table of contents and price will be published at an early day, in order that physicians and others who wish to subscribe and pay in advance shall receive a reasonable discount."

Please address your orders to Detroit Homœopathy Pharmacy

THE HOMŒOPATHIC PRINCIPLE OF CURE

By J. M. Long, M. D.

Read before the Michigan Homœopathic Institute

The various manifestations of disease, ranging themselves as they do with symptomatic order, create classes or distinctive types, known by various names which have become *arbitrary instead of descriptive* through long

use. The cure of disease does not depend upon its classification, but rather upon a recognition of the laws that govern the constitution of man.. A person diseased is simply a person who is not governed by the healthy action of all the organs of the body. Hence the cure of disease is the restoration to normal conditions.

The first, and most direct method of cure proceeds, of course, from the internal effort to create right conditions, or restore the natural condition of the system. Therefore symptoms of disease point out the path that nature is pursuing towards the true and natural condition. The old practice of fighting symptoms of disease, or contending against them as the great evils in the way of health, may be seen to be false by the effort that nature herself makes through them.

The Homœopathic system is formed more perfectly after nature's, not because of its use of attenuated particles merely, but because of its recognition of the power of nature, to direct the method of cure. For instance, a remedy must be able to create a like condition or increase a symptom, that is nature having shown its effects points to the speediest method of cure.

We must demonstrate the power of remedies by showing their specific action in conjunction with nature. The provings of medicines can never be perfectly satisfactory, because no two human constitutions can possibly have the same basis, or be exactly corresponding in their conditions, and what is termed health may be a mere surface harmony and not a real condition of health.—Therefore, it is, perhaps the surest method to use such remedies as adapt themselves the most readily, to the condition of the system, without reference to what may be or what may not have been proved by experiment on subjects termed healthy.

The whole range of Aconite could never have been ascertained by experiments or provings by the healthy, but has been reached by clinical experiments. I would, therefore, venture the suggestion, that we adopt a regular system of reports of cases

that are in any respect singular or noteworthy.

There are doubtless many remedies that would be very valuable, could we but ascertain precisely the conditions to which they are adapted. I have no doubt that nature has hidden in the subtle essences of plant and mineral, every needed force or active power. We need to know what these remedies can do when concentrated, and what is their action when attenuated, we know that some remedies, act homœopathically when given in a crude form; for it is certain that some remedies produce Allopathically or Homœopathically the same effects. I believe it is because the human system is able to accept sufficient remedial power and reject all excess, so that the principle of cure is ever the same. Are there only conditions that are not under the control of the purely homœopathic remedies, or are crude medicines sometimes necessary, and if so, in what cases? I presume there is no physician but finds it easier sometimes to reach disease and bring about desired effects by medicines so crude that they could hardly be called homœopathic as Hahnemann accepted the term, but was this because an attenuation would not have served the same end better, if the right remedy had been chosen in homœopathic form? These questions, it seems to me, should be carefully considered by us all, and if we could gain the experience of our wisest and most careful practitioners, we should be able to ascertain whether our system is at fault or ourselves. I have no doubt of the universal application of the laws of Homœopathy. I know many who fail to trust in these laws and resort to some remedies that are Allopathic in action and effect. There is a divine law uniting man to the animal and vegetable world, every particle of matter has its relation to the human system, but whether the relation is formed through the laws of attenuation alone or whether it is found sometimes in more certainly through cruder forms remains for us to prove. We must prove it by science, and no experiment is too expensive or labor too tedious to show the world the truth. *I believe we are strong*

enough and scientific enough to overthrow all obstacles put in our way.

PROTOXIDE OF NITROGEN.

NITROUS OXIDE GAS AS AN ANÆSTHETIC. —Mr. J. R. Nichols writes to the Boston Medical and Surgical Journal, that within a few weeks a very large demand has arisen for nitrate of ammonia, to be used in the manufacture of the nitrous oxide gas. A salt which a year since was called for only at long intervals and in small parcels, now suddenly assumes importance as a manufacture, and we are called upon to furnish from our laboratory from *fifty to one hundred pounds daily*.

No allusion, I believe, has been made in the JOURNAL to the extraordinary "laughing gas" furor now raging. Its use has been thus far confined to "traveling lecturers," or "exhibitors," and the dentists. The latter class are in a whirl of excitement respecting its use as an anæsthetic, and many are busy extracting teeth by its aid. Insensibility being produced, the operation is painless. It is alleged that its effects are far more pleasant and transitory than those from ether or chloroform, and that entire exemption from suffering is secured. An operator who claims to have administered the gas to *more than two thousand persons* within the year, asserts that not a single instance of unpleasant effects has been observed, and that all brought under its influence have declared the sensations delightful in the extreme. He believes that it is an agent of great importance remedially, and that it is capable of offering speedy and permanent relief, in cases of headache, low vital action, mental depression, &c. &c.

From some observation of its employment, and experiment in its use, I am inclined to regard it as worthy the careful attention of medical gentlemen. Instances of quite remarkable curative effects have been noticed, and upon theoretical grounds it would seem well adapted, by inhalation, to produce decided effects in certain diseases. As regards safety in its use, the fact that it has been for more than a year in the hands of irre-

sponsible and uneducated men, traveling from place to place, causing thousands to inhale it for purpose of fun and entertainment, and no single instance of injury coming to light, is certainly calculated to dispel fear to a very considerable extent.

The Nitrous oxide gas is administered by several dentists of Detroit with good success; teeth are extracted without experience of any pain whatever. One of our patients had twenty-four teeth extracted at one sitting without any inconvenience. Some say that they felt a sensation of fulness of the brain. In reply to the many inquiries of our friends who ask as to its safety, etc., we would call attention to above remarks of Mr. Nichols, and say that it ought not to be administered to any person who has disease of either brain, lungs or heart.

PREPARATION.—Pure Nitrate of Ammonia is introduced into a glass retort, heat applied and the evolved gas passed through water for purification and collected in an india rubber bag or in a gasometer. The only precaution necessary to give is to observe that the temperature should not exceed about 380° Fahr., this will keep the melted mass in a state of gentle ebullition. If the heat applied to the retort exceeds 500° Fahr, white fumes will appear within the retort, and if heated to 600° it will explode with great violence.

Nitrous oxide gas (protoxide of Nitrogen) when pure, is colorless, possesses an agreeable odor, and a sweetish taste; at 45°, under a pressure of 50 atmospheres, it is liquid; this, when exposed under the receiver of a powerful air pump, changes into a snow-like solid; at 150° Fahr it is a transparent, colorless crystalline body; it supports combustion, and is dissolved by cold water. Sp. grav. 1.525 (1.527 Ure.) 100 cubic inches weight 47.29 grains.

EFFECTS.—Pleasurable excitement follows its inspiration in almost every instance, but effects vary according to temperament. In some few instances, where it has been administered to brutalized natures they have been prompted to violence. When given by *lecturers on the platform* there is invariably

laughter and mirthfulness, &c., when given in the same quantity by surgeon or dentist there is no such risibility, because the patient's attention was immediately previous to the inhalation directed to the fact that he was to be operated upon.

APPARATUS.—The apparatus required consists of a tubulated *glass retort* to hold about half a gallon; a *Woulfe bottle* to hold the water for washing or purifying the gas; a gas bag or receiver to hold about 40 gallons; an inhaling bag to hold about 4 gallons; retort stand, spirit lamp, rosewood mouth piece, stop cock, rubber tubing. &c. The whole, with a jar of Nitrate Ammonia, costing \$45. At Dr. Lodge's Homœopathic Pharmacy, Detroit, Michigan.

TOBACCO.

EFFECTS OF TOBACCO UPON THE HEALTH.—The London *Lancet*, in referring to the recent researches of Dr. Richardson with regard to the effects of tobacco upon the health, says —

“In this inquiry every position has been founded on individual research, and though in some instances the research, has rested on the previous labors of other inquirers, the evidence has been confirmed by new observation. Condensed into a few sentences the details of the recent inquiry will be found in the following summary.

“1. The effects that result from smoking are due to different agents imbibed by the smoker, viz., carbonic acid, ammonia, nicotine, a volatile empyreumatic substance, and a bitter extract. The more common effects are traceable to the carbonic acid and ammonia; the rarer and more severe to the nicotine, the empyreumatic substance, and the extract.

“The effects produced are very transitory, the poison finding a ready exit from the body.

“3. All the evils of smoking are functional in character; and no confirmed smoker can ever be said, so long as he indulges in the habit, to be well. But it does not follow that he is becoming the subject of organic and fatal disease because he smokes.

“4. Smoking produces disturbances in the blood, of the stomach, of the heart, of the organs of sense, of the brain, of the nervous filaments and sympathetic or organic nerves, of the mucous membrane of the mouth, and of the bronchial surface of the lungs.

" 5. The statements to the effect that tobacco-smoke causes specific diseases—such as insanity, epilepsy, St. Vitus's dance, apoplexy, organic disease of the heart, cancer, and consumption—have been made without any sufficient evidence or reference to fact. All such statements are devoid of truth, and can never accomplish the object which those who propose them have in view.

" 6. As the human body is maintained alive and in full vigor by its capacity within certain well-defined limits to absorb and apply oxygen, as the process of oxydation is most active and most required in those periods of life when the structures of the body are attaining their full developement, and as tobacco-smoke possesses the power of arresting such oxydation, the habit of smoking is deleterious to the young.

" 7. In the main, smoking is a luxury, which any nation of natural habits would be better without. The luxury is not directly fatal to life, but its use conveys to the mind of the man who looks upon it calmly, the unmistakable idea of physical detriment.

" 8. But as a luxury tending to this condition, it is probably one of the least hurtful of luxuries. It is on this ground, in fact, that tobacco holds so firm a position: that of nearly every luxury it is the least injurious. It is innocuous as compared with alcohol; it does infinitely less harm than sugar(?); it is in no sense worse than tea; and by the side of high living, altogether it contrasts most favorably. It is most antidotal to gluttony.

" 9. Tobacco may also be considered, in certain cases, as a remedy for evils that lie deeper than its own, and as such a remedy it will preist in holding its place until those evils be removed.

NICOTINE.—It is stated that the tobacco crop of the world is 250 millions of kilogrammes (= 5,512,500 lbs. av.) Schlosing, as already quoted, this Journal, [1], iv., 278, found in various tobaccos an average of about 5 per cent. of nicotine.

It is clear therefore, that about twelve and a half millions of kilogrammes (= 2,756-250 lbs.) of this poison are annually produced. As the sp. gr. of nicotine very slightly exceeds that of water, this quantity would fill nearly 100,000 wine barrels, and would give twelve and a half grammes (= 298.025 grains) to every man, woman and child on the globe. As a few drops will produce death, it is probably much within the mark to say, that one year's crop of nicotine could destroy every living creature on the face of the globe if its proportion was administered in a single dose.—*Silliman's Journal*.

EFFECTS OF TOBACCO.—Dr. B. W. Richardson has made some interesting remarks from the observation of a large number of smokers. In the morning, before smoking, the blood of a great smoker is in a normal condition; in the evening, after smoking fifteen or twenty pipes, the blood becomes abnormal; the central point, that is, the central depression of the blood corpuscles, is not visible, and the drops of blood coagulate without drying, which occurs when taken upon the person awakening in the morning. After a tranquil night of sleep, the morbid phenomenon referred to disappears. The inhalation of air charged with ammonia has the same effect upon the globules of blood as the smoke of tobacco. The author moreover remarks, that the breath of smokers is always more or less ammoniacal.—*Amer. Jour. Med. Sci.*

COWPOX.

M. BOULEY has pointed out an important circumstance to the Academy, which will doubtless occasion much discussion. A horse was brought to him affected with aphthous stomatitis. He thereupon inoculated the liquid aphthous matter on the teat of a cow, on the 10th of last June. On the 18th, of five punctures, four presented pustules perfectly identical with cowpox.—M. Bouley then inoculated two infants with matter taken from these pustules. In one of the infants three perfect pustules, identical with vaccine pustules, were developed.—This child was presented to the Academy. Moreover, five pupils at Alfort, all perviously vaccinated with this new matter, which produced in them a more or less marked pustulation, similar to that produced by vaccination.—*British Med. Jour.*

LOCATIONS.

Homœopathic Physicians desiring to settle in the State of Michigan are requested to write to the editor of the journal, he will take pleasure in directing them to several very desirable locations.

SARRACENIA PURPUREA.—Doctor A. N. McDowell, Acting Assistant Surgeon in the United States General Hospital, at Trenton, Mo., reports the result of his treatment of 48 cases of smallpox in that hospital. The general treatment was by the use of stimulants, lager beer being swallowed *ad libitum*; the diet, eggs and milk. The purely medical treatment was in the use of the *sarracenia purpurea*, or pitcher plant. An ounce and a half of the leaves to a quart of boiling water was boiled down to a pint and half, and a wine glass full given every six hours.

It was administered in 86 out of 48 cases. One case is reported. On the appearance of the eruption, the remedy was given. The eruption, instead of proceeding to suppuration as usual, began to dry up; the swelling of the part diminished, the secondary fever was slight, and *all* the symptoms were mitigated. In a short time, instead of scabbing, the scales fell off like bran. The usual pitting was also prevented by this treatment, the scales as they came off leaving the face smooth. But four deaths occurred. Dr. McD. concludes his report in the *American Medical Times* by stating that "the conclusion is inevitable that sarracenia is a most useful medicine in variola."

PURE GLOBULES—PURE ALCOHOL.

Some Physicians still persist in the use of the all-sugar globules made by the confectioners in pans used for flavored candies instead of using the pure-sugar of milk pellets made by a Homoeopath who never applies his apparatus to any other purpose. The difference in cost is about one cent an ounce, the difference in actual value to the physician how much?

Then some M. D.'s prefer Alcohol that is odorant of fusel oil, etc., etc., because it costs *half a cent* an ounce less than one that is absolutely free from any impurity. Query—Do the medium dilutions prepared with such alcohol contain as much medicine as they do the impurities of the spirit?

DECREASE OF POPULATION IN EUROPE.—Population in any country has a tendency to increase more rapidly than the means of subsistence can increase. Population doubles in twenty or twenty-five years. Subsistence (unless under very extraordinary circumstances) will not increase in anything like this ratio. The disproportion must be kept down, either by increase of deaths or by a diminution in the amount of subsistence enjoyed by each individual, or by diminution of births through fewer and later marriages, or by emigration. Ever since the commencement of the potato disease in 1845, if not a little earlier, there has been a very marked diminution in the rate at which population has advanced in Western Europe. In France the rate of increase was estimated at 0.646 per annum from 1801 to 1836; at 0.446 from 1839 to 1856, and is now less. In Western Germany there has been an extremely slow increase in most parts, an actual diminution in others—Electoral and Grand Ducal Hesse. In Great Britain the population since the census of 1811, has increased not faster than that of France. That of Ireland has greatly diminished. That of Scotland has scarcely increased at all. The whole increase is in *England and Wales*, and generally speaking

in the towns and manufacturing districts. To take the case of England and Wales alone these had 18,000,000 of inhabitants in 1851, 20,000,000 in 1861; but it must be remembered that England draws constantly increasing supplies of people from other parts; the whole 2,000,000, therefore, can on the set down at the natural increase.

PROBABLE DURATION OF LIFE IN PHTHISICAL PERSONS.—With regard to the probable duration of life of such persons as are doomed to die of phthisis, Dr. Bruckner has deduced from his statistical investigations the following conclusions:—In a person of phthisical constitution, the danger of becoming affected with consumption increases up to the twentieth year, when it has reached its highest point. The danger may be reckoned as equal to 21.05 years of life, so that such a person at the age of 23 years has the same expectancy of life as a healthy individual at 44. From the thirtieth year when it may be reckoned as equivalent to 17.42 years of life, the danger goes on diminishing. In the fortieth year it is equal to 13.94 years, in the fiftieth to 7.28 only. In the seventieth year the danger is at an end, a person of phthisical constitution having the same prospects of life as any other individual of that age. Under similar circumstances, phthisical persons of the female sex die more rapidly and at an earlier age than males. The female sex reaches some years earlier than the male its highest point of mortality from phthisis.

If a person is actually affected with phthisis, his probable duration of life is 21 months and 9 days. A pregnant woman, during the duration of her pregnancy, is not likely to die of phthisis. After delivery, a consumptive woman has probably not more than six weeks to live. For all phthisical persons, the danger of dying is considerably greater in spring, less in summer and winter, and least of all late in summer, towards autumn. If a phthisical person removes from a warm to a cold climate, the danger of death is thereby greatly increased.—*Edinburgh Medical Journal from Constat's Jahresbericht.*

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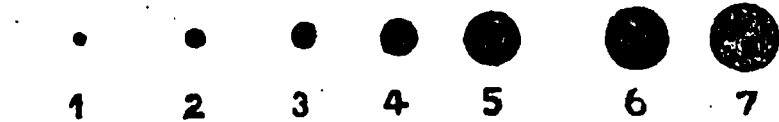
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QUESTION OF DOSE.

BY C. J. HEMPEL, M. D.

[An intelligent physician who is giving up the uncertainties of Allopathic practice, writes :—

"I am studying and practising, as far as possible, Homeopathy, and am quite satisfied with the results of my 'investment of thought', and money so far. There is a difference of teaching in regard to "dose," which is just now giving me a good deal of trouble.

Dr. E. M. Hale in the preface to his excellent monograph on Gelseminum lays down a 'general axiom of the law of dose,' that when a group of symptoms, &c., constituting a disease, resembles the *primary* symptoms, &c., of a drug, such drug should be given in small doses, and *vice versa*.

Dr. C. J. Hempel in his Materia Medica, pages 62 and 72, lays down the opposite doctrine—on page 72, fourth paragraph, 'while

the primary symptoms prevail, a large dose is preferable to a small one.'

For the information of this physician as many others, we present the following article from the pen of Prof. Hempel, which we have just received from him.]

The question of dose has been unnecessarily, and, in my opinion, injudiciously complicated by the writers of our school. Hahnemann, struck by his discovery that a very small quantity of drug-power is sufficient to curatively affect the organism in corresponding states of suffering, was very naturally fascinated by this extraordinary phenomenon, to such an extent that he made the use of an infinitesimal dose the test of orthodox practice in accordance with the law "*similia similibus curantur.*" Hahnemann's immediate followers made an infinitesimal dose the corner-stone of the homeopathic edifice. For a long time the middle and higher attenuations, from the twelfth to the thirtieth, were considered and employed as the standard "homeopathic" dose. Until the appearance of the Hygea, the doctrine of "homeopathic" dose weighed like an incubus upon the Homœopathic School. Science and experience have demonstrated the fact that there is no such thing as a "homeopathic" dose. The term "homeopathic" applies to the relation of drugs to diseases. A medicine is homeopathic to a disease, if it is capable of affecting the organism in health similarly to the pathological disturbance which had been developed in the tissues by some one of the morbid principles or forces which embody themselves in drugs as their natural and orderly substrata. Such a medicine, if truly homeopathic to the disease, will affect it curatively in most cases, even if administered in a proportionally small dose. Compared

to the ordinary doses of the dominant school, the millionth part of a grain or drop, or even one, two or three drops of the tincture of such drugs as Chamomilla, Euphrasia, Pulsatilla and a number of others, might still be considered a tolerably small dose. Experience, however, has shown that such quantities, if the drugs are strictly homeopathic to the diseases for which they are administered, are unnecessarily and often hurtfully large.

A scientific classification and graduation of doses, according to their size, is impossible. All such arrangements depend in a great measure upon the fancy of the individual practitioner, upon the susceptibilities of the patient, and upon other incidental circumstances. A few drops of the tenth attenuation of Digitalis have repeatedly induced paroxysms of vertigo; yet who would call a few drops of such a preparation a large dose in an absolute sense? In a case of dysentery I have seen the most marked aconite-symptoms developed by a single drop of the third centesimal attenuation of this agent mixed in half a tumbler of water; yet such a dose would be considered very small by any person of common sense. Yet, if these drugs were strictly homeopathic to the disease, the doses in which they were administered, were evidently too large, at any rate unnecessarily large.

On the other hand, I have often been obliged, in cases of organic dropsy, to administer the tincture of Digitalis in five-drop doses three, four or five times a day, before the medicine afforded the desired relief. In an absolute sense these doses are tolerably large; yet, if a smaller quantity of the drug had been given, it would have remained ineffectual; the dose would have been too small. It is needless to multiply these illustrations in order to show that the terms large and small, if applied to the size of the dose, have to be understood in a relative sense, and that a dose which, in an absolute sense, is either large or small, may be the opposite with reference to a concrete case.

All new beginners in Homeopathy are more or less puzzled by the question of dose, nor do their minds become settled on the *subject until they have familiarized them-*

selves with the philosophy and practical results of this great science by persevering and enlightened observations at the sick bed. In the meanwhile a few suggestions which have been derived from this source by unprejudiced co-temporaries, may prove of use to inquiring beginners.

In my Materia Medica I have laid down the doctrine that the lower attenuations or triturations are more particularly adapted to the primary stage of a pathological disorder. In a case of catarrhal or rheumatic fever, for instance, I should give the first or second attenuation of the indicated remedy, Aconite, Belladonna or some other drug, if I were called during the incipient invasion of the disease, before the reactive stage characterized by heat and dryness of the skin, and a full, more or less bounding or jerking pulse had set in. Five or six drops of such an attenuation in a small tumblerfull of water might prove the right dose as far as quantity is concerned. In many cases it might even be preferable to give one or two drops of the tincture in the same quantity of water. A large dose of Aconite will depress the pulse and the temperature of the body. In inflammatory diseases which are ushered in by a chill and an increased rapidity and diminished volume of the pulse, I should prescribe the tincture or the lower attenuations of Aconite, if homeopathic to the disease, provided I saw the patient at this stage. I designate this first invasion of the disease as its primary stage, and the depression of the heart's action and of the animal temperature as the primary stage of the Aconite-disease, which, if the reactive energy of the organism is not destroyed by the poison, will sooner or later be followed by an opposite train of symptoms which I designate as the reactive or secondary stage. Other physicians may extend the boundary of the primary stage and may include the secondary stage in this definition. The primary stage proper being generally of short duration, we are scarcely ever called to a patient before the secondary or reactive stage which some authors designate as the primary stage, has set in. For this stage a smaller dose is recommended than might

often be required after this stage has already run a certain course. But all such statements are more or less arbitrary, and our best writers still differ very widely on the size of doses. In this number I do not include fanatical dogmatists, some of whom see no salvation in any but the most massive doses, whereas others anathematize all but the higher attenuations from the one hundredth to the ten thousandth and upwards. I allude to authors of a philosophical turn of mind, who consider it a physician's privilege to use the whole scale of our preparations, from the tincture upwards.

In general we may lay it down as a rule that the first, second or third attenuation of most drugs may be safely used in all acute and even in most chronic diseases, no matter at what stage we are called upon to treat them. In many cases of acute disorders, more especially after they had been dilly-dallied with by the so-called high potencies, we shall even find it necessary to prescribe the saturated tincture or the lowest triturations of such powerful drugs as Arsenic, in order to hasten an abiding reaction. In organic diseases, organic dropsy, enlargement of the liver or spleen, chronic swelling of joints, bones, &c., and in a variety of chronic cutaneous disorders, I prefer the lower preparations to the higher. In acute or chronic diseases arising from the action of some malignant miasm or virus, I never fail to resort to the lower preparations. If the remedy is strictly homeopathic to the case, it should be given in sufficient quantity to determine the curative reaction of the organism in the specific direction of the disease. It is impossible to indicate positive and unvarying rules in regard to dose, but it is safe to caution a beginning practitioner of Homeopathy against the pernicious fallacy that, if the remedy is homeopathic to the disease, the size of the dose is of no consequence. Many valuable lives have been sacrificed by this heartless and ignorant dogmatism, which might have been saved by a philosophical application of the principles of our Art.

We would say to all our friends that a dose, of itself, is neither large nor small, and that it only becomes so when measured by

the wants of the sick organism. It is small when insufficient to subdue the disease as promptly, thoroughly and safely as the nature, the course of the disease, and the quality of the organism would admit of it is large if the cure is unnecessarily complicated with the manifestation of avoidable drug-effects.

It is time that our contentions about the size of the dose should cease. Our object is to cure our patients with as little and no more of the specific homeopathic agent than is required to effect this great end; let our attention be directed towards it with an enlightened liberality and unceasing watchfulness, and we may succeed, in the course of time, in arriving at such general principles in regard to the size and repetition of doses, as may prove sufficiently accurate to serve as permanent landmarks to the student of Homeopathy.

DRUG PROVING.

BY P. P. WELLS, M. D., BROOKLYN, N. Y.*

The attempt to cure diseases by the use of drugs was first made many centuries ago, and from that time to the present these have been the favorite agents in the hands of men who have devoted their time and talents to curing the sick. In many generations they have constituted almost the entire arsenal from which this class of men have drawn the resources demanded by the duties of their special calling; and in all time, since they were first brought into use, they have been largely the majority of all the means employed in the art of healing. In their use, with patients and their friends, there has always been a kind of mystery, which carried with it a peculiar charm, which sanctified and made tolerable, the otherwise intolerable disgust inseparable from the common experience of their administration and effects. While on the other hand, with the profession, this mystery has been cherished and magnified as an object dear to the heart, and a means of exalting the estimation of the importance of the functions they were supposed to be

* American Homœopathic Review, Dec. 1882

executing. The association of mystery and ignorance is no new compact, neither has it been a novelty, for many centuries, when affectation of the one has been made to serve as a cover for the other. This is as old, and has been as common, as the substitute of arrogant assumption for positive knowledge. But, has mystery in the use of the drugs been made a cover for ignorance of their nature and effects? Let the experience of any man, well informed in the premises, answer. Is not the continued experience of thirty centuries, of the use of drugs in the treatment of the sick, a sufficient answer to the charge, or suspicion, of ignorance of their nature and effects, on the part of those to whom they are still chief favorites, and a principal reliance in this treatment? Let the current treatises on *Materia Medica*, of the old school of medicine, stripped of their unacknowledged borrowings from that of the new, answer. It may be affirmed without fear of contradiction, that beyond a few of the most obvious generic effects of drugs, the ignorance of their actions on the living organism has been most complete, through the centuries in which they have been so liberally employed. And further, that the medical profession, while content with a hypothetical philosophy of diseases, was also so far satisfied with this ignorance of the nature and action of the agents it employed for their cure, as to have taken no measures, worthy of respect, for its removal. A few writers, in all this time, more enlightened than their fellows, were alone conscious of the disabilities arising from this state of things, and had slight and occasional glimpses of the measures to be taken for its removal; but not one of these even, put forth an earnest effort to realize his own conceptions of the needed reform. It was not until the discovery of the law by which diseases are cured by drugs, that there was any conception of the extent or importance of drug actions on the living organism; much less of the necessity of an exact knowledge of them, in order to an intelligent use of these agents for the cure of the sick. This discovery disclosed the necessity of an exact

and exhaustive knowledge of drug action, and imposed the obligation of serious and continued efforts to attain it. This necessity was first observed, and this obligation first acknowledged and obeyed, by the discoverer of this law of cure; and the knowledge, when gained, he called the proving of the drug. They are both now fully recognized by the adherents of the school of practice he inaugurated, and with them the only question now is, how, and by what means, is this knowledge to be gained? or, in other words, what is necessary to obtain an answer to the two following questions:

What is a drug? and, what is it to prove that drug?

In order to a clear understanding of the true answer to the first question, we must go back of it and ask another—What is life? Answer: The continued action of those forces, through and upon the organs of the body, which preserve it from decay. This is life. And health is that balanced action of these forces which preserves the integrity of all its parts. In this balance is the conservatism of the whole, without this, destruction of parts more or less is the result, the value of which is determined by the importance and number of organs or functions involved.

A drug is any material agent the ingestion of which is capable of so disturbing this balanced action of the vital forces, that the functions of one or more of the organs of the body are no longer executed in the manner the best welfare of the whole requires; and all material agents capable of so acting on the living organism, are drugs. Hence drugs are destructive. The difference, and the only apparent difference between drugs and food, is that of destruction and conservation.

To prove a drug is simply to ascertain what disturbances of this balance it is capable of producing. What are the organs it invades, and what are the modifications of function it produces? Answers to these questions, when ascertained and recorded, are the proving of that drug.

How are these answers to be obtained? In the first place, they can only be gained satis-

factorily, in circumstances which make the problem a simple one. Any circumstance which complicates the inquiry diminishes or destroys the value of the answer. These are to be guarded against chiefly: First, in the quality of the drug. It must be pure, *i. e.*, it must possess all its active properties, and be free from mixture with other drugs. Second, in the state of the prover. He must have in himself that balance of the action of the vital forces which we call health, and which we propose to disturb by the drug; and, third, in the circumstances which surround the prover. These must be such as are not liable of themselves to produce disturbances which may be put to the account of the drug.

Having, so far as possible, secured these necessary conditions, how shall we proceed to prove a drug? It is pure, the prover is healthy, and of such intellectual and moral character as to qualify him for the great work, and his circumstances such as to warrant a reasonable freedom from complicating disturbances, and now what shall the prover do?

In the first place, he shall not depart in any way from any of his ordinary habits of life, with a view to avoid modifying influences, because his life is based on these habits and conformed to them, and any important change in these, must result in changes more or less important, which may be put to the account of the drug. His food, drinks, sleep and exercise must be such as he has been accustomed to. His common pursuits should not be departed from, and every circumstance and act the nearest possible to those of his common daily experience. And, then, to be a prover of the drug, he must possess such susceptibilities to its action as will admit of developing in him the specific results of its use.

All men and women are not equally good provers, neither is any one equally a good prover of all drugs. Most persons have some peculiar susceptibilities to the action of some drugs, of which they are consequently good provers. And if others fail of realizing results which verify their experience, this is not therefore to be rejected.

Peculiar susceptibilities make the knowledge of peculiar facts possible, and their possession of the greater value, because peculiar. He must not only have the requisite susceptibility, but also that intelligence of subjective phenomena which will enable him rightly to appreciate and record them intelligently. In this there is a wide difference in men and women, both in the perception and description of such phenomena.

Every practitioner of much experience has found difficulty in obtaining from some patients an intelligent account of their sufferings, not because they did not suffer, but because of this deficient power of perception and expression. Such persons can never be good provers. A good prover must also honestly record all experienced facts, after the commencement of his experiment, and be equally scrupulous in avoiding skepticism, imaginary phenomena, and undue coloring of those which are real. It has been too common with some excellent men to receive all facts, at first, with suspicion, and to regard this as a duty and function of superior wisdom, never realizing that a fact suspected is more than half rejected, and that whether suspected or rejected, it is a fact still, and its value in no wise affected by this absurd mistake. Such persons can never be good provers, if indeed, they can be provers at all. A prover, at the beginning of his experiment, must be in that degree of physiological equilibrium which is not subject daily and hourly to abnormal sensations and disturbance of functions, which would invalidate or complicate his observations.

These most requisite preliminaries being secured, and having determined to make the experiment of proving a drug, what is the object to be sought? We answer, principally to ascertain those facts which place the given drug in the series of curative agents; by which also it is related to diseased conditions, and by which those conditions may be cured. But are not all disturbances of the vital forces, such as have been stated in the outset of these observations, alike so related? Nothing is more certain, than that all symptoms of dis-

action have not an equal value in this respect. And while all are the proper subjects of record by the prover, all are not equally curative, and some probably not curative at all. The proper object of the prover is to ascertain those which cure. Or, in other words, those which are peculiar to the drug, and which distinguish its action from that of other drugs; the power to cure having been fixed in these, and not in those symptoms which are common to it and other drugs. If it had been otherwise ordered, the impossibility of finding a curative in a given case of disease, by any distinctive signs, would have necessitated the giving the series of drugs successively to which the symptoms in common belong, till the right was found, till which time the sufferings of the patient would remain unrelieved, and perhaps his safety be compromised. The proper object then of the prover of a drug is to ascertain its characteristic symptoms, and to distinguish them from those common to other drugs. This can only be done by recording all the facts observed, and then comparing this record with the records of the ascertained effects of other drugs, and noting the resemblances and differences. The proving of a drug, then, consists of two parts, the observation and record of its actions, and the analysis and comparison of them with the recorded observations of the actions of other drugs.

Having complied with all the requisites for a true proving and having a clear view of its proper object, what course shall be taken to secure it? This is made up of two parts. The dose—how much, and in what state; and the repetitions; how often it shall be taken? First of the dose. It may be of the crude drug, or of a low or high potency of it. Which is preferable? In a given case, the answer to this will depend, first, on the nature of the drug; and, second, on the susceptibility of the prover. Those drugs which in their natural state affect the organism but slightly, as *Carbo veg.* and *Silicea*, require to be potentized in order to the development of their characteristic effects on the prover. While those which are prompt in their action, as *Ipecac.*, may

be proved in the crude state or in low potencies; but if the drug be actively poisonous, as *Merc. cor.*, it can be proved only in the potencies.

The object of the proving is a knowledge of what is peculiar to the drug—its characteristics. In those drugs which are comparatively inert in their natural state, these are rarely developed after crude doses. So that most of the so-called provings of such substances, in such doses, are comparatively valueless. The same is, to a great extent true of such provings of active poisons. The one class is expelled from the system without ever coming into active relation to the forces of life, with a manifestation of few or no symptoms; the other, by the violence of its action, causes its speedy expulsion, with few symptoms, and these such as are common to the drugs of its class, and are therefore of little or no practical value. The disturbances of functions are such as might have been the result of almost any drug of its class and therefore a generic and not characteristic; and for this reason, not curative; and so are no answer to the problem before the prover. This is probably the true explanation of the poverty of the provings of *Tartar emet.*, *Corrosive sublimate*, and some others. The second element in determining the state of the drug to be taken, and its quantity, is the susceptibility of the prover. The greater this, the less the dose, as a general rule. If the organism be powerfully impressed suddenly, it may so revolt against the dose as to expel it at once, with only generic symptoms, and the prover fails of his object. If the prover be of only moderate impressibility, he may realize valuable results from larger doses. If very obtuse, he is but poorly fitted for his work. In a word, he is to take the drug in such doses as will admit of and secure the pervasion of his organism by it, so that its effects may be developed in the functions of the various organs of his body. This can generally be better done by its gradual than sudden introduction; as in this way we avoid those violent functional alarms, which, when they occur in a proving, work our certain defeat. Hence, in those proving,

where a first dose is followed by no marked results, it is better to repeat it, and, if necessary, many times, till symptoms are developed, than to begin to increase the dose with each repetition, as the manner of many has been. This method usually results in a few generic symptoms, and these consequently are not worth the pains they cost. By the gradual introduction of the drug, the organs became pervaded by it, tolerate it and respond to its specific impression, and its characteristics are secured. Hence the great error of those who have questioned the value of provings with high potencies. If the attempted proving with these, owing to the unimpressible nature of the prover, or from any other cause, produces no results, it can in no way invalidate the truth of those obtained from the provings of others better endowed for the work. From the very nature of the case, symptoms so obtained, which are genuine, must possess the highest value.

In regard to the repetition of doses by a prover, it is to be governed by the nature of the drug, and the results already obtained. Drugs of slow action, as Causticum, Lycopodium, etc., are to be taken at longer intervals than such as are quick, as Aconite, Arnica, Ipecac., etc. This is the general rule, which, if it be remembered, with this one other, to repeat no dose while symptoms are being realized from those already taken, the prover can hardly make a mistake. This last is equivalent to that rule in practice which forbids the repetition of doses while those previously taken are still active, and in all provings, is of imperative authority. The reason for this is that, from the nature of the case, the total symptoms of a drug are produced in sequences, some earlier and some later in the series, and while these are being developed, a repetition of the dose only sets the prover back to the beginning again, and by continued repetition of this process, he may never reach those later and more valuable symptoms which a better method might have secured.

The second and not the last important duty of the prover is, to record the symptoms of the proving as they occur.—First,

in the order of their appearance; and, second, with all their attending circumstances. It is important that the natural order be preserved, because all symptoms in the series are not of equal value, and one of the elements which enables us to determine the value of symptoms is the date of their occurrence after the taking of the dose producing them. The more remote from the taking of the dose, the greater the value of the symptom. The prover is to be explicit, in recording pains experienced, to state their exact locality and quality. It is not enough to know he had pain, he must state of what kind it was. If shooting, in what direction it passed. If it appeared first on one side and then on the other, to note carefully that first attacked, so that it may be known whether the symptoms passed from right to left, and the reverse; and if the course were from within outward, or the reverse, and also of any symptom whether its course of progress were from above downwards or the reverse. In these peculiarities are found the characteristics of many drugs. He will also note most carefully all the circumstances of the appearance of a symptom, and also all those which cause its aggravation or mitigation; such as time of day, morning, forenoon, afternoon, evening, night, before midnight, after midnight, or better still, if possible, the exact hour, as many valuable symptoms of valuable drugs are characterized by this fact, as those of Lycopodium which appear at four, p. m., and of Kali carb. at three, a. m. He must note the position of the prover when the symptom appeared, and also those positions by which the symptom is aggravated or relieved. Was he standing, walking, sitting, lying; on the right or left side, or back; how it is affected by motion or repose; how by particular motion, if at all; how by eating, drinking and sleep, and how after these; how, if at all, by the presence and acts of others, and whatever other modifying acts of himself or others, or whatever other circumstances may have favored the appearance, or increased or diminished the intensity of the symptom. This part of the duty of the prover should be insisted on the

more earnestly, because many extensive records of the effects of drugs, when these have been omitted, have been made and published, which are by the omission rendered nearly useless in practical medicine. They are only records, they are very far from being provings, and provings only can have practical value. The extent to which our *Materia Medica* has suffered at the hands of ignorant translators and condensers by the omission of these facts of the original record, can only be understood after comparison of the original provings of the earlier Homœopaths and their associates with the translations and abridgements of these gentlemen, which have appeared as "Manuals" and "Codices." These latter are only like an attempt to produce a living man without a soul. These elements are the very life of a proving.

Then, as has been already stated, he is faithfully to record all the facts. He is to judge no one too insignificant for note. How many sufferers have been relieved by Kali carb. by the intelligent student of the *Materia Medica*, who knew this peculiarity of its cough at three in the morning, who would have been unrelieved had this fact been omitted by the prover. And what fact in its record of symptoms appears more unimportant to him who is no student? If the prover is in doubt as to whether any fact be the result of the action of the drug, let it be recorded as a fact still in question, but on no account omit it. In deciding whether it be of the drug, he must refer to his ordinary past experience, when not subject to drug action, and also inquire whether it can more reasonably be referred to any other agent, and then, if possible, verify the fact by subsequent observations. In his record he is to remember that skepticism is a curse; and imagination a lie; and that the truth has no part with either.

Objective phenomena make but a small part of the record of past provings, and especially of those of the early provers. It can hardly be necessary to say that all such appearances should be carefully noted, though *the value of many of them as indicia for the selection of a curative drug may be well*

called in question, and the exact importance which may belong to any of them, for this purpose, may not yet be well settled. Still if no greater good comes from their careful record and study than to establish this value and to give them their proper place, whatever it may be, in the elements to be considered in prescribing for the sick, it will not prove a labor in vain. At first glance it would certainly seem that these phenomena should occupy the first place among those which decide a prescription, but a careful study of those great cures which have been recorded and published for our instruction, by the early masters of our art, will disclose the fact that they play but a small part in their prescriptive decisions. And, at the present time it may not, perhaps, be going too far to anticipate, that when the truth is finally and undoubtedly disclosed, which answers that most important query,—What is the "like" which cures? objective phenomena will occupy quite a subordinate place in that curing similarity. In my own past experience it is not difficult to remember many disappointed expectations of success based on these great uncertainties, nor to recollect that in my observation of the practice of others, those who have most relied on these phenomena, and have sought to be mainly controlled by them, have not been the most successful physicians; and that some such, after years of struggling in their great endeavor to make this a basis of a successful practice, have finally, in their disappointment, seemed to apostatize from a faith they never either cherished or comprehended, and to have abandoned a practice they had never adopted. Such memories are instructive, if not decisive of the possibility of erecting a successful practice on this uncertain foundation.

EDITORIAL NOTE.

We wish to return a grateful acknowledgment to those friends who have sent us prompt subscriptions, communications and words of encouragement. One sends his "best wishes for our success"; another "I am much pleased with the contents and spirit of the first number"; a medical professor, "I believe the publication of such a Journal

may do much good in a practical way, especially in the department of new provings, and in making suggestions for the use of new remedies." Many other friends write us words of commendation and express their satisfaction with our first number. We must say that *we* are not satisfied with it. It does not come up to our design at all. The present number, with a valuable article from Professor Hempel, and other good papers, approaches our idea more nearly.

We promised that advertisements should be excluded from body of Journal and inserted in a neat cover, if subscriptions paid for the printing, we now fulfil that promise, and instead of giving one-third the amount of matter for \$1.00, that is contained in the three dollar journals, we will make it at least one-half as much. With your help the Observer shall to be a success, and we expect your support will be adequate to cover expense of further improvements. We ask for prompt remittances of subscriptions and more than this, contributions from all who desire to make this Journal a spirited and useful publication.

DETROIT, Feb. 1st, 1864.

COW POX VIRUS.

The pure imported virus, as sold at Detroit Homeopathic Pharmacy, for \$2.00, is in minute glass tubes, holding some three to five drops. Enough for twenty vaccinations if used at same time.

One end can be broken and a needle inserted in the matter, which will be sufficient to vaccinate one child. To insure absorption, it is recommended to make with a thumb lance a large number of very minute punctures, not drawing blood.

CASE OF MUMPS, WITH METASTASIS to the Meninges of the Brain and Spinal Cord—Recovery. By E. M. HALE, M. D., Professor of Materia Medica in Hahnemann Medical College, Chicago.

It is well known to medical men that this specific inflammation of the parotid gland is often translated to the testicles in the male, and to the mamma, or even the ovaries and

labia in the female. But it is not so generally known that the inflammatory action may be translated to the brain or its meninges. In the case which lately came under my observation and treatment, that inflammatory action undoubtedly involved the membranes of the spinal cord.

The child, a little girl, aet. 8, was attacked on the 23d of December with swelling of the left parotid. Three other children of the same family had the mumps at the same time, but in all the disease pursued its natural course. But in this case, on the fourth day of the disease the tumefaction suddenly subsided, and the little patient was seized with *intense pains, coming on in paroxysms, in the head, and spinal column.* Obstinate vomiting set in, all food and beverage was rejected by the stomach. There was present some heat of the skin, particularly of the head and back, pulse 120, small and hard, tongue red on the edges, coated white in the centre, trembling when protruded, pupils dilated, expression of the eyes, staring, glistening and unnatural. No sleep day or night on account of pain in the head and back.

These were the symptoms for two days after the subsidence of the swelling. Her case had been under charge of Dr. A. Miller, of this city, who had administered Belladonna, Aconite, Hyosciamus and Apis. His prognosis was so unfavorable that I was called in consultation. I could do no more than confirm the unfavorable prognosis of my colleague, for the cases of metastasis of Parotitis to the brain, have pretty generally been reported fatal.

At my suggestion, Veratrum viride 1-10. dil. one drop every two hours, was given in alternation with Belladonna 2d.

The Verat. v. has a decided influence in warding off impending inflammation of the brain and its membranes, and relieving the the congestion always present in such cases.

Jan. 1. We found the patient in about the same condition as the previous day, except that the pulse was softer, and 100 per minute. The paroxysms of pain were nearly as severe, the vomiting as frequent and obstinate. The latter symptom undoubtedly produced from cerebral irritation. Cuprum

aceticum was selected from its well known homœopathicity to such a state. One grain of the 1-10 trituration was dissolved in half a glass of water, a teaspoonfull was ordered every half hour, at the end of three hours the vomiting appeared to be aggravated. The medicine was then given ever three hours. Under its use the vomiting subsided in eight or ten hours. For the remaining symptoms *Zincum met.* 2d. and *Nux.* 3d. were given in alternation, and *Aconite* tincture applied liberally to the spinal column.

Under this treatment, continued for four days, the child improved rapidly, and is now convalescing finely under the use of Phosphoric acid and China.

It is a notable fact that no actual spasms were present at any time, nor was there any delirium, except for a moment or two after waking.

NITROGLYCERINE (GLONOINE).

BY JOHN M. MERRICK, JR.

Various experiments have been made by different observers* upon the action of nitroglycerine or glonoine upon the animal economy—the nitroglycerine, or its solution in alcohol, being administered by dropping it upon the tongue—the effects which have been noticed being generally acceleration of the pulse, headache and prostration, and in peculiarly susceptible persons, these symptoms greatly aggravated.

These experiments, though somewhat contradictory, are very interesting, both from a chemical and a toxicological point of view, but do not touch upon one matter, viz. the effects of the inhalation of the vapor of glonoine—a subject to which considerable interest must attach itself when we consider the rapidity with which the symptoms develop themselves when only a fraction of a drop is placed on the tip of the tongue.

In preparing a quantity of nitroglycerine in 1859, I met with an accident, the result of which exhibits in a very marked and satisfactory manner the toxical properties of this curious substance, and shows the necessity for extreme caution in handling it, especially when mixed with a volatile and inflammable solvent, as alcohol or ether.

The nitroglycerine was prepared by allowing pure glycerine to drop from a pipette with a glass stop-cock, so adjusted as to

allow from fifteen to twenty drops to fall in a minute into a mixture of equal volumes of the strongest nitric and sulphuric acids cooled by very cold water.

In repeated experiments I have found that, in spite of the precautions taken to cool the acids, it is impossible to avoid an accident now and then, since, when the action reaches a certain intensity, just as in the oxidation of uric acid or cotton, the experiment ends in an explosion or a violent evolution of nitrous fumes. When such a result occurs in making glonoine, the bystander seldom escapes a severe headache, even though the experiment be conducted in the open air.

After glycerine equal to half the bulk of the mixed acids had dropped in, the whole was thrown into a large volume of cold water, thoroughly washed, drawn off with a pipette, dissolved in ether, and the ethereal solution evaporated on a water-bath. It was in this part of the preparation that the accident occurred which enables me to speak of the consequences which follow the inhalation of the vapor. The glass dish in which the evaporation was being conducted, by some mishap tipped over, spilling half its contents on the hot copper bath, and in a moment the room was full of the mixed vapor of nitroglycerine and ether. Although I stood directly over the water-bath to adjust it, and must have inhaled a large volume of the mixed vapor, no instant bad result followed, but in less than fifteen minutes a headache set in, slight at first, but increasing in intensity by degrees, until in an hour and a half it became almost intolerable. It was accompanied by a good deal of faintness and exhaustion, intolerance of light, and a feeling of great general distress and alarm, in addition to the racking pain. Relief was only obtained at length by the inhalation of a large quantity of ether, the insensibility produced by which was followed by broken and disturbed sleep lasting until the following day, which was marked by weakness, exhaustion and slight headache. These unpleasant symptoms did not finally disappear for three or four days.

It may be remarked that, during all the time that the severe pain and distress lasted, consciousness was never lost for an instant. In Mr. Field's case,† two drops of a solution containing only one drop of glonoine to ninety-nine of rectified spirit produced loss of consciousness and other very alarming symptoms of narcotic poisoning.

The effects of glonoine upon different individuals are exceedingly different and contradictory. Two drops of a diluted solution containing only one drop of nitroglycerine

*Vide Braithwaite's *Retrospect of Practical Medicine*, part xxxvii, p. 294.

† Vide Braithwaite *ut supra*.

in ninety-nine of alcohol producing alarming symptoms of poisoning in one person, while another swallows two hundred drops of a similar solution with no other ill effects than a slightly "muddled" feeling in the head. I have experienced unpleasant feelings from tasting exceedingly minute quantities of pure nitroglycerine, such as headache, buzzing in the ears, with a feeling of nervousness and depression, although the action of the drug does not seem to be nearly so powerful or so rapid as when it is given in the form of alcoholic solution. Pure nitroglycerine is volatile at ordinary temperatures—a fact which was accidentally discovered in drawing off with a mouth pipette some nitroglycerine which had just been washed with water. Headache and the usual symptoms immediately set in, though not a particle of the liquid touched my mouth or tongue.

The following experiment, which shows that some constitutions are susceptible to the action of one-fortieth of a drop of glonoin, was made with a solution of nitroglycerine containing two and one-half drops of the pure substance to ninety-seven and one-half of alcohol. The solution was dropped upon sugar, and the sugar allowed to dissolve on the tongue.

My general health being good, and my pulse being seventy-nine, about two and one-half hours after a full meal, I took one drop of the solution. In two minutes my pulse was ninety four, with dull, throbbing headache; in five minutes the pulse was one hundred, the headache changing from the back to the front of the head; in ten minutes the pulse was down to eighty-eight, and in fourteen minutes back to its normal rate, seventy-nine, although the headache did not wholly pass off for fifteen minutes more. It will be noticed that a quantity of the solution was taken, equal to only one-fortieth of a drop of pure nitroglycerine.—*Am. Journal Science*, No. 107.

[NOTE by the Editor of DRUGGISTS' CIRCULAR.]

The liquid preparation known as *glonoin*, as will be seen by a paragraph in our last issue (Sept. 1863, vii. 139, in an abstract from a paper by Prof. Sobrero in the *Jour. de Chimie Med.* (4) viii. p. 367) is not pure nitroglycerin, but is mixed with some other volatile products of the action of nitric acid on glycerin; pure nitroglycerin being a solid and explosive substance resembling pyroxylin.

NITRO-GLYCERIN (PYROGLYCERIN OR GLONOIN.

When two volumes of oil of vitriol, sp. gr. 1.815, and one vol. of nitric acid, sp. gr.

1.37, are mixed, and then cooled, and one-sixth of their bulk of glycerin is added, it dissolves; but after a while oily drops appear in the fluid, which rise to the surface, forming a clear yellowish oil; this is washed with from 15 to 20 times its bulk of cold water, as long as it gives off any acid, and is finally dried on paper, having congealed during the washing. It has then a spec. grav.=1.60, is odorless, but possesses a pale yellow color, arising probably from foreign impurities in the glycerin. The taste is rather sweet, but applied to the tongue it causes, even if thrown off again, headache of several hours' duration; it is also very poisonous to the lower animals. On paper it leaves a greasy stain; it is still liquid at 20° C (=88° F.), insoluble in water, but very soluble in alcohol and ether; water precipitates it from the alcoholic solution; it is not volatile, and bears a temperature of 212 Fahr. without change. A drop heated slowly on platinum foil decomposes cooling nitrous acid fumes. At higher temperature the decomposition is sudden with violent deflagration and combustion, a little charcoal being left behind.—*Journ. de Med.* (4) Tome viii., p. 367.

PROPHYLACTIC POWER OF INFINITE-SIMAL QUANTITIES OF IODINE.

At a recent meeting of the French Academy, M. Chatin took an opportunity of again bringing forward his theory of the origin of bronchocele, and laid much stress on the importance, indeed on the absolute necessity of the presence of iodine in both air and water.

"The best, the lightest, and most aerated water," said M. Chatin, "is rain water, a fact demonstrated by the perfect health of the inhabitants of those districts in which it is exclusively used, and who are never liable to goitre or cretinism.

"Spring water varies much according to the nature of the soil through which it has percolated, and from which it arises. Hence it is sometimes excellent, and sometimes unfit for use, and can neither be rejected nor adopted, in a general and exclusive manner.

"River water differs from the water supplied by springs, by its admixture with rain. In this circumstance, and to a considerable absorption of air, it is indebted for its good qualities.

"M. Chatin then expatiated on the connection of goitre and cretinism with the nature of waters, and described the geological peculiarities of bronchocele, which displays an unvarying dependence of the number of cases of goitre on the chemical com-

position of the waters, and especially on the presence or absence of iodine as an ingredient.

"The learned member criticised the various theories propounded on the pathology of goitre by MM. Grange, Boussingault and Bouchardat, and more particularly controverted the views of the last-named author, as to the influence of organic matter on the production of the disease. In support of his argument he adduced this remarkable fact, that the inhabitants of the Valais, amongst whom goitre and cretinism are so notoriously prevalent, use almost exclusively the waters of the glaciers, which are perfectly pure, and entirely free from all organic matter, whereas, on the contrary, the inhabitants of turfy valleys, who consume water loaded with organic deposits, enjoy entire freedom from bronchocele."

"Hence, remarked M. Chatin, in conclusion, the best, the only preventive treatment of goitre, is to use water naturally or artificially iodized."—*Journal of Practical Medicine and Surgery*.

The quantity of iodine in water is extremely small. Even the iodine-springs contain quantities almost infinitesimal. Thus, in the Leamington water (Robin's Well) the proportion is one of iodine to seven hundred thousand of water; in the old well at Cheltenham, one in four millions two hundred thousand parts; and in a brine-spring at Nantwich, one in eight hundred and forty thousand parts.

These proportions are to be found only in so-called iodine waters; but in common spring, river, or rain waters, the quantities are of course much less. The prophylactic powers of such minute portions of matter afford arguments in favor of our infinitesimal doses of medicine.—*Dr. John Ryan's Monthly Homœopathic Review*.

INVESTIGATIONS TOUCHING THE USE OF IODINE.

Dr. Rosenthal, assistant physician at the Vienna General Hospital, has published, in the *Wiener Med. Wochenschr.*, a series of papers containing much original matter touching the therapeutic use of iodine. The summing up is as follows:

1. Large doses of iodide of potassium, combined with a small quantity of fluid, remain a long time in the economy; with large quantities of fluid, they are quickly washed away from the system and pass rapidly into the secretions and excretions. This circumstance should be carefully noticed.

2. When iodide of potassium is taken internally, it is found, not only in the urine saliva, and other secretions, but also in the

alvine evacuations, within from four to seven hours, whether the stools be aqueous or the reverse.

3. In the administration of iodide of iron, iodine is separated in considerable quantities and found with a large proportion of the iron in the urine. Fæcal matter contains much iron, and a small amount of iodine. The same phenomena may be noticed when iodide of mercury is used.

4. Frictions with an ointment containing iodide of potassium upon sound skin will cause the iodine to be detached in the urine and saliva.

5. Iodine is found in the urine of those who take baths in which iodide of potassium is dissolved, even when the rectum and urethra are kept free from the action of the bath. This is proved by examining the urine, and by noting a large diminution of the iodine in the water used for the bath.

6. The intestinal mucous membrane takes of the iodine very energetically in the form of enemata, and this is the case even with very weak solutions of iodide of potassium.

7. Large doses of iodide of potassium, or small doses taken for a long time, are not well borne in certain pathological states of the economy; in fact, large doses of iodine, or concentrated solutions, are very prejudicial to the system.

PHYSIOLOGICAL CURIOSITY.

The following interesting case is reported to us by Dr. Smart, a student of Hahnemann Medical College, Chicago, from Hudson, Michigan:

The following case, which recently came under my notice, in the practice of Dr. E. M. Hale, of this city, aptly illustrates the importance of a familiar acquaintance with Anatomy and Physiology, without which the practice of medicine must ever prove unsatisfactory and uncertain. The case was as follows: A girl of nine years of age, subject to rheumatic attacks would at times be seized with Torticollis or *wry neck*, the head being drawn backward and to one side. It was noticed, that during these paroxysms the *Uvula* would be forcibly drawn upward and towards the effected side. The reason of this phenomenon would of course be sought for and the enquiry, if addressed to the physician unfamiliar with the relation of these parts would prove a poser. The probable explanation of it is this, viz: the muscles spasmodically contracted in causing the distortion of the head were the

Trapezius, Sterno-cleido-mastoideus and *Splenius*. These muscles receive their nervous supply principally from the posterior branches of the first four or five cervical nerves. The muscles which control the motions of the Uvula and soft palate (*Ayrgos Uvula, Levator Palati, &c*) receive their nervous influence from the Spheno-palatine ganglion, which is in direct communication with the origin of the first four cervical nerves by means of the *Vidian nerve* and superior cervical ganglion, thus it is apparent that the *sympathy* of these parts so related must be very intimate, and that any influence centric or eccentric, which would give rise to disturbance in one set of muscles, would, in like manner, affect the other set. While the otherwise inexplicable phenomena becomes simple and may be subjected to an intelligent and efficient treatment. Dr. Hale informs me that in this case, which he still has under treatment, he has derived much benefit from the use of *Bell. and Ignatia; Colchicum*, also was of some value in relieving the paroxysms, but the former remedies have proved of more permanent advantage.

DR. A. R. SMART.

CHICAGO, ILL.

CORNUS FLORIDA.

BY E. J. BATES, M. D.

In the treatment of Ague and all of those malarious fevers, so common in Michigan, I have used this remedy with perfect success—in fact I regard it when used in the hands of a good Homeopathic Physician as the *true Ague specific*,

I have always found it quick and positive in its action without leaving any of the injurious effects upon the system, which are experienced in the use of *Quinine*.

Since residing in Michigan I have used the *Cornus Florida* both as a *single* remedy, and in alternation with other agents; generally using the second or third potency, and in no case have I failed to find the most beneficial results.

Formerly, when using *Quinine*, I was troubled with the recurrence of the disease, in seven, fourteen or twenty-one days, but

have found no difficulty of the kind arising from the use of *Cornus Florida*.

The most obstinate cases of *Ague* and chill fever have yielded in two or three days time, some of them having been for weeks under the most experienced old school treatment.

At your request, I will give you a case or two.

Case 1st. A young man of twenty years had been sick seven or eight weeks, had taken the usual remedies without any perceivable good effect. Gave him *Cornus* 8d every two hours. Result: no more chills and a speedy recovery of the patient.

Case 2d. A man about thirty-five years of age had been sick seven weeks during which time he had been treated by three different M. D's.—all claiming to be experienced practitioners. The patient had become very much reduced from repeated chills, fever and vomiting of blood every other day.

In this case I used the *Cornus* in alternation with *Tart. Emetic*.

Result: Patient had but *one* chill afterwards and no vomiting of blood.

A few days treatment produced a permanent cure.

Case 3d. A young man of eighteen years had severe paroxysms of Ague daily; had taken Quinine for several days with no good effect. Gave him only *one* prescription of *Cornus Florida* 8d, to be taken every two hours, which completely cured him.

I might append more cases similar to the above, but having already occupied more space than I intended will forbear.

Many of our home friends in Central Michigan are now using the "*Cornus*" with such complete success that *Quinine* no longer is sought for or used by them.

CLINICAL NOTES.

BY E. J. BATES, M. D.

APOCYNUM CANNABINUM.—I have used this remedy for several years, in the treatment of Ascites, and from its prompt action on the kidneys have found it a most valuable agent. I find it a most valuable remedy

in Hydro-thorax, having used it in my own case as well as in general practice.

TRILLIUM PENDULUM.—Have used this remedy in the most severe cases of Uterine hemorrhage with the best results. In cases of threatened Abortion I consider it has few if any equals.

GELSEMINUM.—In the treatment of the malarial fevers, so common in the West, *Gelseminum* has proved a most available agent. Have used it often in alternation with *Veratum viride* in pneumonia and other inflammatory diseases, and find it an invaluable remedy.

PODOPHYLLUM PELTATUM.—This remedy has proved itself one of the best agents in the treatment of *Constipation*. I have cured many cases of long standing by its use.

NITROUS OXIDE GAS.

DIRECTIONS FOR GENERATING AND ADMINISTERING.

"Introduce into the retort Nitrate Ammonia a sufficient quantity, apply a gentle heat, gradually increasing it, until a brisk ebullition takes place.

Let the Gas pass through the Washer for a moment before connecting large Bag in order to expel the atmospheric air. Fill the Washer about two-thirds full of water, and put one gallon in the large Bag, always replenishing both every time the Washer is used and the bag filled. When the bag is full or the Gas ceases to run, disconnect the Retort from the Washer, and close stop-cock on large bag which will avoid the water rushing back and breaking Retort.

Always inhale some of every new lot, in order to satisfy yourself that it is all right. If pure, it will not produce any irritation in the throat, or any unpleasant feeling in the system, if impure it will, and then you must let it stand awhile, and the water in the bag will remedy the difficulty.

Allow the patient to inhale through the mouth, at the same time stopping the nose. Let them expel the atmospheric air from the lungs before inhaling. Allow them to inhale until they pass the exhilarating effect and become sound asleep.

The only possibility of having impure Gas from pure Nitrate Ammonia by the improved Apparatus is the volatilized nitrate ammonia which might be carried over by excessive

heat and the gas remaining over the water in large Bag would remedy that."

See page 11, *Observer* No 1.

Present price of improved apparatus complete \$45. Pure Nitrate Ammonia (extra) at 60 cents per pound in Jars. Parts of Apparatus supplied to order.

CRUST OF BREAD.

M. Barral has presented to the Academy of Sciences some remarks of much interest concerning the crust of bread and the gluten contained in it. He had recently shown that, when equally dried, the crust of bread is more highly azotized than the crumb; and he also showed that the crust was more soluble than the crumb in water. M. Payen, had, it is true, previously pointed out this greatest solubility of the crust, and had ascribed it to the conversion of the starch into dextrine during the baking. But M. Barral's experiments show another important act. "If," he says, "we exhaust with water an equal quantity of dry crust and dry crumb of bread, we find that the soluble portion of the crust consists of from 7 to 8 per cent. of nitrogen, whilst the soluble portion of the crumb contains only from 2 to 3 per cent. The greater solubility of the crust consequently depends upon the transformation its gluten has undergone under the direct action of the 200° to 220° heat of the oven. The soluble portion of the crust is more highly azotized than the juice of meat." M. Barral added, that he was still engaged with his experiments, which he hoped would throw some new light on panification.—*British Med. Jour.*

WESTERN HOMŒOPATHIC COLLEGE. CLEVELAND, OHIO.

We are very happy to hear of the prosperity of this institution. There are at present attending the lectures, 21 students from Ohio, 5 from Michigan, 4 from New York, 3 from Pennsylvania, 2 from Illinois, several from other States, and 9 from Canada. Total Matriculations —.

The present faculty consists of —

- A. O. BLAIR, M. D., Prof. of Materia Medica and Practice of Medicine.
- J. BRAINERD, M. D., Prof. of Medical Chemistry, Botany and Toxicology.
- J. C. SANDERS, M. D., Prof. of Obstetrics and diseases of women and children.

E. F. HUMISTON, M. D., Prof. of Elementary Chemistry.

S. E. BRCKWITE, M. D., DEAN and Prof. of Surgery and Surgical Anatomy.

T. P. WILSON, M. D., REGISTRAR, Prof. of Anatomy and Physiology.

GEORGE WILLEY, Esq., Prof. of Medical Jurisprudence.

A. W. WHEELER, M. D., Demonstrator.

H. CRAIG, M. D., Janitor.

Females not admitted to graduation. (Why not?)

BAUNSCHEIDTIISM.

By the above term is understood a method of cure for certain diseases, which has already created considerable attention in medical circles. It was introduced by a German named Baunscheidt in 1848, and consists in the introduction of a certain oil into the system through little punctures made by an instrument called the Lebenswecker. In this country Firmenich has taken up the process, and offers to the profession his instrument, which though differing somewhat from that of Baunscheidt, produces a similar result.

For a time it was not known as to what exactly were the properties or constituents of the oil of Baunscheidt, but it has recently been found to consist of *Apis mellifica* mixed with pure olive oil. In another column will be found some very remarkable cases that have been treated by the introduction of *Apis mel.* into the system by this method.

It is not well for physicians or laymen to seize upon every new discovery or invention, and before its virtues have been thoroughly tested to vaunt its powers to the sky, nor on the other hand, is it wise to immediately decry such new methods of cure as are brought to our notice.

One thing, however, would appear to be proper, and that is, if the external application of *Apis* can and does upon actual experiment produce beneficial results, and these results are proven conclusively from repeated experiments upon healthy and diseased individuals, then where the similar symptoms are noticed, there can be no objection to the Homeopathic physician externally applying *Apis*, any more than there could be in the internal and local exhibition of Arnica or Calendula or any other medicinal substance. The great point in the matter lies in the one fact, *the proving of the substance in question*. We must be careful not to be led astray by the extra-

vagant laudation of enthusiasts. No doubt Baunscheidt supposes that every disease can be cured by his Lebenswecker; so does the electropath believe he has found the specific in his battery, as does also the hydropath in his water application, and—the quack in his nostrum. We must beware lest we fall into error, and at the same time examine carefully for the truth. We must prove all things and hold fast that which is good. H.

TRANSLATED ARTICLES.

Notes from Practice, by Florian Sirsch, Homoeopathic Physician at Schonburg.

EXTERNAL USE OF APIS MELLIFICA.

Guided by numerous recent cures which have been made with the internal exhibition of the poison of the honey bee, I prepared for my own use a quantity of *Apis oil* for external application, the results of which experiments I herewith publish.

PREPARATION OF THE APIS OIL.

The bees being most irritated at the time of swarming, should be caught at that period; care being taken that they do not lose their sting, which is likely to happen if, while exasperated, any obstacle impedes their progress, for by this means a great portion of the poison would also be lost. After having caught a sufficient quantity I placed them in a narrow-mouthed bottle and filled it two-thirds full of olive oil. The vial should then be tightly corked, kept in a cool place, and well shaken several times during the day. When the oil is prepared in this manner, it remains cloudy for some time; but if the bottle is well corked and tied with bladder, and then allowed to remain for two days in the sun, it being shaken well several times during each day, or it is distilled in the water bath for several hours, the oil becomes and remains clear; it may then be kept in a cool place, the necessary quantity being poured off for use as required.

APPLICATION OF THE APIS OIL.

From this time I always used, after the application of the Lebenswecker, the *Apis oil* prepared in the above manner; and have seen with the greatest satisfaction the finest effects; cures having resulted which in my opinion could not have been made with the internal use of the *Apis*. I have used the oil in the above named preparation and also considerably diluted, and have observed equally fine effects; good cure being produced. As soon as the application of the Lebenswecker has been made, I of

the parts with a brush, and the skin becomes immediately of a purplish red hue. The punctures then swell to small pustules, which resemble the cutis anserina, and the patient perceives on those parts an increased sensation of warmth and a slight burning and itching, the latter frequently continuing a long time. There will be also more or less excitement of the system which continues for several hours and disturbs sleep, particularly if the oil has been applied in the evening. In such cases the oil may have been too strong, or the application made on too many parts of the body, or on too large a surface. The pustules close after the swelling, although Baunscheidt asserts that they remain open by the application of oil for ten days, discharging impure matter. On the second day the reddened points can scarcely be noticed with the naked eye, and a small scab may be observed over the punctures; this falls off the third or fourth day, and all traces of the operation disappear after six to eight days. In some cases the points become ulcerated; generally, however, I believe this to be the case where there is a Psoric diathesis, unhealthy skin, or something of a similar character. For instance, a woman fifty-nine years old, who had been subject to floodings, and was suffering from chronic inflammation of the eye-lids, soreness behind the ears, constant cold in the head, &c., was Baunscheidted and rubbed with *Apis* oil on the neck, behind the ears and on the temples to relieve a neuralgia in the face; next morning every point was ulcerated, accompanied with swelling, itching and burning, without great redness. The face-ache had, however, a great deal diminished. The patient, however, did not allow a second application of the Lebenswecker, thinking the eruption had been occasioned by its use. When the neuralgia returned, it was cured by *Colocynth* and *Spigelia*.

Second case—A gentleman addicted to the use of coffee and tobacco, and subject to frequent attacks of gout, had the Lebenswecker applied for periodical asthma and cough; a lady also, 23 years of age, had been suffering for years with gutta serena, the eruption had been suppressed by the use of so-called Kummerfeld's water, was, on account of rheumatic pains in her teeth, stiffness of the neck, shoulder blades, elbow and wrists, Baunscheidted between the scapulæ and on the upper arm. In both cases all the punctures became ulcerated and suppurated for several days, and although the Lebenswecker was not re-applied, the rheumatic pains were a great deal relieved, and the cures ultimately effected by sulphur.

Although my observations are mostly on chronic diseases, which I shall publish hereafter in this paper, I have used of late in several cases the *Oleum Baunscheidtii*, and after careful observation having noticed nothing differing in effects from those produced by *Apis* oil.

Baunscheidt's oil is probably nothing else but *Apis* oil, or something similar to it. Moreover, my experience is not of a limited character. Any one who has learned the therapeutic effects of the honey bee, will not doubt for one moment the truth of all I have said, and can easily be convinced by following my example.

Third case—J. Kranich, potter, 32 years old, very weak constitution, choleric temperament, had not been sick in childhood, except from some forms of scrofula, scald head, and swelling of the glands of the neck. Some six months since became affected with a catarrh, probably from cold taken while bathing; this he for a time did not notice, or indeed until he suffered from a cough both day and night, did he apply for medical advice. In spite of all syrups, mixtures and vesicants (not to forget leeches), the cough remained unchanged, until my assistance was finally procured. I found the patient sitting in bed, the head supported on the hands, and the elbows on the knees. In this position he had to remain the whole night. As soon as he would lie on the side, the cough increased and forced him to resume the upright posture; there was also severe pains in the forehead, which were attributed to the exertion of coughing; itching on the top of the head; tongue clean; little appetite; thirst, not violent; voice, hoarse, together with harsh, deep breathing, which irritated the cough, it being quite dry and spasmodic in the morning and in the evening; especially, however, increased at night.

(To be continued.)

A STUDENT WANTED.

A Homeopathic Physician and Dentist, having an extensive practice in each branch of business, offers to one or more young men of good references and adequate ability, an opportunity of paying their way by their services till the completion of their studies in either or both of the professions, and thereafter a co-partnership interest, if proving worthy.

Address J. M. Blakesly, M. D., Dansville, Liv. co., N. Y.

A M E R I C A N

Homœopathic Observer.

"*Similia, Similibus, Curantur.*"

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[No. 3.]

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EDITORIAL NOTICES.

The Observer comes to your table again with articles certainly worthy of perusal, and probably hints and suggestions worth a year's subscription. We feel obliged to those friends of the enterprize who have remitted us so quickly. *Subscriptions have come in from every Northern State and from Canada* quite liberally. One sends us \$5.00, for which we mail him seven copies. Improvements will be noticed, and *prompt remittances will enable us to do still better.*

Correspondents will please to send us brief articles. Our readers are principally practitioners who do not find time to read prosy papers, and they would pass such by were we to print them. Be as pointed, and practical as possible.

New Provings. We are happy to be able to announce that we are in receipt of sufficient manuscript for Prof. HALE to

commence printing his work, **NEW PROVINGS OF INDIGENOUS AND CHEMICAL REMEDIES.** The articles now complete, are *Cimicifuga*, *Apocynum cannabinum*, *Apocynum androsemifolium*, *Asclepias tuberosa*, *Asclepias syriaca*, *Nuphar lutea*, *Cornus florida*, and *Cornus circinata*. We shall feel particularly indebted to any physician who is in possession of provings, partial provings, or notes of treatment, with any of the following remedies, if he will send them to Dr. E. M. HALE, Box 550, Chicago, Ill.: *Æsculus hippocastanum*, *Aletris farinosa*, *Arum triphyllum*, *Baptisia tinctoria*, *Caulyphyllum thalictroides*, *Collinsonia canadensis*, *Cornus sericea*, *Cypripedium pubescens*, *Dioscorea villosa*, *Eryngium aquaticum*, *Erigeron canadensis*, *Euphorbia corollata*, *Ergotine*, *Eupatorium aromaticum*, *Eupatorium perfoliatum*, *Eupatorium purpureum*, *Gelseminum semper virens*, *Gossypium herbaceum*, *Hamamelis virginica*, *Helonias dioica*, *Hydrastis canadensis*, *Iris versicolor*, *Leptandria virginica*, *Nitrate of Uranium*, *Phytolacca dacandra*, *Podophyllum peltatum*, *Silphium laciniatum*, *Senecio gracilis*, *Saracenia purpurea*, *Sanguinaria canadensis*, *Sticta pulmonaria*, *Trillium pendulum*, *Veratrum viride*, *Xanthoxylum americanum*, *Zizea aurea*. It will be necessary to send immediately, as the work will be soon completed.

Hill's Epitome. The new edition of Dr. B. L. HILL'S *EPITOME of the Homœopathic healing art* will not go to press until *after* the completion of Dr. Hale's book.

Special Inducements to Cash Subscribers. The price of paper and cost of printing has advanced over fifty per cent., and as these things are held as strictly *cash*, the outlay for these books is necessarily large. We propose relieving ourselves of much of this burden without unduly

taxing our friends. We will send to any one who will pay Three dollars *in advance*, the volume of New Provings by Prof. Hale, Dr. Hill's Epitome, and the Observer for 1864, and give the same privilege to any who have already paid in cash for either of the books or for the Observer. Some have paid \$2 for New Provings only, send \$1 and the Observer and Hill's Epitome shall be forwarded. Those who have sent \$1 for Observer, can send \$2 more, to pay for New Provings and Hill's Epitome. *This offer is open for the month of March only.* The retail price of New Provings after that time will be \$2.50. Hill's Epitome, 50 cts. Observer being \$1—this offer for advance payment makes a deduction of 25 per cent., which our friends will doubtless think liberal.

Other New Books. E. C. FRANKLIN, M. D., is preparing a new work on the Principles and Homœopathic Practice of Surgery. Prospectus promised.

Prospectus of the new work on Practice, by Drs. MARCY & HUNT, not issued yet.

Dr. LUTYIES advertises a new Homœopathic Directory of the Homœopathic Physicians of the United States.

Prof. HEMPEL's new Materia Medica is in progress, but we are not yet able to answer our correspondents definitely as to the time when it may be expected from the press.

Acknowledgments. We feel much indebted to JOHN F. GRAY, M. D., of New York city, for a copy of his able and very interesting discourse on "The Early Annals of Homœopathy in New York," delivered before the Homœopathic societies in New York and Brooklyn.

Also to H. M. PAINE, M. D., Secretary of the Homœopathic Medical Society of the State of New York, for the "First Report of the transactions of this society." *This is published by the State of New York as Assembly Document, No. 232.* It forms a handsome volume of 188 8vo. pages, neatly bound and embellished by a likeness of the late A. Gerald Hull, A. M., M. D.

Medical Investigator, January, *North American Journal of Homœopathy*, February, (*British*) *Homœopathic Observer*, Feb., (*British*) *Monthly Homœopathic Review*, received.

Western Homœopathic Observer. Some weeks after the issue of our first number we received from a medical friend the first number of this journal. This is the only number we have received. We hope it has not been discontinued.

Surgeon General Hammond is under trial before a court martial at Washington. That "Calomel and Antimony order" was too large a dose for the doctors!

The Legality of Drug Provings recognized. The Gelseminum case. There are a few copies of this pamphlet left, which will be sent to any of our subscribers gratuitously.

Obituary. We have lost from the Homœopathic ranks, during the month of January, of this year, by death, JOHN ADAMS TARBELL, A. M., M. D., who died suddenly at Boston, on January 21st. Dr. Tarbell was the author of "Homœopathy simplified," and other works.

ABRAHAM DURYEA WILSON, M. D., who died at New York city on January 20. Dr. Gray says of him: he was "A ripe scholar in the humanities, a physician in full practice, a genial man, quick to learn, apt, and able to instruct." The Homœopathic Medical Society, N. Y., appointed their president and two other members a committee to make suitable preparations for a public meeting and eulogy.

Our Colleges. The Homœopathic Colleges have been very well attended during the winter. We are not directly in the interest of any institution, and expect to keep an independent position—friendly to all. We are promised articles from professors of two schools and hope to receive others.

Locations. We are still able to direct young graduates and others to places where educated homœopaths are in demand and will met with *immediate support*.

Vaccine. Present stock large enough for March. Our friends will please not to send any more until April. We put it up between small plates of white wax, warmed slightly, pressed together, then enveloped in tin foil, but even with this care we would not want to rely upon any matter over a month old.

DETROIT, March 1, 1864.

PHYTOLACCA DECANDRA AND ITS USE IN DIPHTHERIA.

BY W. H. BURT, M. D.

Pathogenetic effects resembling Diphtheria.—

Constant dull frontal headache aggravated by motion. Drawing sensation above the root of the nose. Pressure in the eyes; dull aching pain in the eyes. Loss of taste. Tongue is very rough with blisters on the sides that smart severely. Pressing pain in the right side of the throat. Sore throat, with great roughness in the pharynx. Constant inclination to swallow, which produces severe pains in the root of the tongue and fauces. Violent inflammation of the soft palate and tonsils; the left tonsil is swollen as large again as the right. Thick white and yellow mucus about the fauces. Violent inflammation of the œsophagus down to the stomach. Food produces severe pain the whole length of the œsophagus. Feeling as if something had lodged in the œsophagus. Profuse hæmorrhage from the nose. Loss of appetite. Urine strongly *albuminous*. Bowels either constipated or loose. Violent aching of the back, and limbs very weak and faint.

What better picture of Diphtheria could be produced by a remedy than this. Those symptoms were all produced in myself. I took the remedy until I could not swallow anything for two days but a little liquid food. The toxical effects of the Phytolacca is mostly all spent upon the throat. Among all the long list of remedies in our school we have none that can equal the Phytolacca in diseases of the throat. In the treatment of diphtheria, Belladonna and the preparations of Mercury cannot be compared to it. I have treated eighteen cases of Diphtheria with nothing else but the Phytolacca. Twelve of these cases were of a very dangerous character; all of them were cured in from three to eight days. The one that lasted eight days was an extremely bad case; she was a young lady; two had died in the family treated by old school physicians. My case was the worst of the three. She has recovered her health again, but all the water she drinks passes out of her nostrils. The dried root is useless. A tincture made

from the green root, or a trituration is the only preparation that ought to be used. It should be collected before it commences to grow in the spring. I will recite a few cases:

Mr. F. *aet.* 26, Jan. 4th, 9 P. M. Slight pain in the left tonsil when swallowing, rested well until 2 A. M., awoke with a severe frontal headache, back and legs aching very hard, with high fever and sore throat; could not sleep any more. 8 A. M. pulse 120 and very soft. Head, back and legs are aching violently. Throat very sore; left tonsil very much swollen and covered with a grayish false membrane; right tonsil has patches of the pseudo-membrane on it. Deglutition is almost impossible. Great prostration; can stand up only a few moments at a time, it makes him so faint and dizzy. Gave Phytolacca four doses every hour with a gargle of the same, consisting of 50 drops into a tumbler of water.

5th. Feeling very much better. Fever nearly gone. Head, back and legs do not ache half as much as they did yesterday. Pulse 100. Throat is feeling very sore. Left tonsil very much swollen and still covered with the pseudo-membrane; the right one looks very red with small patches of membrane on it. Deglutition almost impossible. Continued treatment.

6th. Feeling very much better, pseudo-membrane is off from both tonsils; they look very red and the left one is still swollen. No fever. Slight appetite. Continued treatment.

7th. Feeling quite well but throat pains him when swallowing. Discharged cured.

Mrs. G. *aet.* 21, nursing a babe. Jan. 11th. Throat commenced to feel sore. Had a very restless night. 12th. Slight headache with a very severe pain in her back and legs. Very chilly all the time. Throat very sore; both tonsils very much swollen and covered in patches with a dark colored pseudo-membrane. Deglutition very difficult. Face very much flushed. Great prostration. Cannot sit up any, she is so faint and weak. Bowels regular. Gave Phytolacca, 4 drops every half hour, with a gargle of the same.

13th. Feeling very much better. Fever all gone. Back and legs do not ache any. Throat is feeling very sore. Tonsils very red and swollen, and covered in patches with the pseudo-membrane. Deglutition is very painful. Continue same treatment once an hour.

14th. Feeling quite well. Pseudo-membrane is off from both tonsils; there are large holes eaten into the tonsils. Can swallow quite well. Continued same treatment every two hours. Discharged her cured the next day. The babe nursed her all the while, and did not take the disease. I attended a lady once before that nursed her babe through the disease, and it did not take it.

Miss K. *Aet.* 9. December 12th. For the last two days has had a fever with chills all the while. Throat has been very sore, and is getting worse all the time. Head, back and legs are aching constantly. Pulse 130; very weak and soft. Soft palate and tonsils are violently inflamed and swollen; both tonsils are covered with grayish pseudo-membrane. Cannot swallow anything. Very weak; cannot sit up. Has not eaten anything for two days, neither can she be persuaded to take any kind of nourishment. Gave Phytolacca, 2 drops every hour. Morning feeling a little better. Pseudo-membrane looks about the same. Continued treatment. Morning good deal better. False membrane beginning to come off. Continued same treatment. Morning feeling quite well. False membrane is all off, but the throat is feeling very sore. Continued same treatment one day more, then discharged her cured.

Little Henry. *Aet.* 4. For two days has had a little fever and sore throat. Says he is cold all the time. Refuses to take food. Both tonsils are as large again as they ought to be, and covered in patches with a whitish false membrane. Pulse 113; very weak. He lies on the lounge all the time. Gave Phytolacca, 10 drops in a tumbler one-half full of water. Cured in two days.

It is remarkable to see how quickly the fever abates under the influence of

the Phytolacca. I believe the sooner the Phytolacca can be administered to the patient, the better. It makes no difference what stage of the disease we give the Phytolacca in, it will cure the patient if the air passages are not effected. If the air passages are involved, I would alternate the Phytolacca with *Iodine*, *Bromine*, *Kali-Bichromicum*, or some remedy that has a specific affinity for the air passages. I have reported 12 cases to Prof. Hale, for his work on new provings, to be published by Dr. Lodge, Detroit, and would refer my readers to this book for further information regarding the use of Phytolacca.

ÆSCULUS HIPPOCASTANUM.

DR. WM. M. CUTHBERT, in N. A. Journal for February, 1864, says: "I proved the drug to a limited extent on my own person, not being subject to piles, using the first potency. The effects produced being a *painful weakness of the loins, with dull, aching pain, accompanied by severe tumors around the anus*. These symptoms becoming so severe as to interfere with professional duties, I was reluctantly compelled to end the proving, and one dose of *Nux vomica* antidoted in a few hours all the painful symptoms, since which I have experienced none of them.

Cases referred to by Dr. Cuthbert.

1. Man; *aet.* 37; Mechanic. One dose of third potency not only entirely relieved the piles, but also enabled him to lay off a truss which he had worn for years for an inguinal hernia.

2. Mrs. M. Piles, (protruding at times,) of ten years' standing, cured with three doses. It is now three years since, and she has never had any symptoms of it in that time.

3. Mr. B. External piles. Promptly cured with one dose; *Nux vomica* never having any effect.

4. Mr. L. Blind bleeding piles of twenty years' standing, cured with three doses, one every two weeks.

[We have prepared a cerate from the *Æsculus* which has been found a very efficacious and convenient external application to pile tumors.—Ed.]

STICTA PULMONARIA.*

Partial Proving and Clinical Observations.

BY S. P. BURDICK, M. D.*

Nov. 9th, 1859, I commenced proving this plant, having previously prepared a strong tincture.

At 7 o'clock, A. M., I took 10 drops of tincture. About one hour after I had sharp, darting pains in the arms, legs and shoulders; commencing first in the muscles of the arms, then in the finger-joints and shoulders. Next in the thighs, knee-joints and toes. Also dull sensation in the head, with sharp, darting pains through the vertex, side of the face, and lower jaw. There was a feeling of fullness at the root of the nose and in the left hypochondriac region. These symptoms were well marked, they continued from two to three hours, and were followed by a general feeling of dullness of two or three hours duration.

Nov. 10th, 7 o'clock, A. M., took ten drops. The symptoms which followed were similar to those produced by the first dose. There were also: a dull, oppressive pain in the cardiac region; slight oppression of the lungs; dull pain in the right hypochondrium. Duration from three to four hours.

Nov. 11th, took at 7 A. M., 20 drops of the tincture. About one hour after, I experienced the previous dull sensation in the head, with dull, heavy pressure in the forehead and roots of the nose; darting pains in the temporal region; burning in the eyelids, with soreness of the ball on closing the lids, or turning the eye. There were burning, biting, sticking pains all over the body. Lancinating pain in the second joint of the middle finger; inability to concentrate the mind upon any one subject; a general confusion of ideas. The above symptoms continued to increase in intensity during the entire day, and most of them continued until the 13th, without repeating the drug.

CLINICAL OBSERVATIONS.—1. A few weeks previous to the above experiments, I was attacked with catarrh of the head, to which I was subject, and had been for about five years; at times it was very severe, obliging me to keep my room for a week at a time. The above attack was one of the severest I had ever experienced. I discharged quantities of bloody pus from the nose and throat, and it left me with a distressing cough and oppression of the lungs, causing the feeling of a hard mass collected in them. The cough was at first dry and hacking, from tickling in the larynx, which finally extended to the lungs. During the day I was comparatively free from the cough, but it re-

turned every evening about 6 o'clock, and would continue the entire night, being almost incessant. I could not sleep nor lie down. All treatment failed to afford the slightest relief, and I had become completely worn out from the cough and want of sleep.

I now prepared a tincture from *Sticta* and put a few drops in a tumbler of water. At 1 o'clock, P. M., I took a teaspoonful and continued to repeat it every hour during the afternoon. At 10 o'clock P. M., my cough had not returned as I had coughed but once or twice during the evening, but on retiring that night there was a slight return, lasting perhaps for a half hour, after which I slept quietly all night. The next day I took of the medicine several times, and had no return of cough.

2. Some two weeks after, I took a slight cold, which brought on catarrh in the head again. There came with it a slight cough which increased, and in the evening it was quite troublesome. I took of *Sticta* two or three times during the evening; and, to my great surprise, I awoke the next morning perfectly free from catarrh and cough.

These results of trials of *Sticta* on myself in disease, induced me to attempt the proving above reported. The following notes of cases treated by this remedy may show its ordinary operation in the forms of diseases in which its powers have been most frequently tested.

3. Dec. 12th, Mrs. S—— had taken a severe cold, had a hard, racking cough, aggravated by every inspiration, and there was considerable oppression of the chest. At 6 o'clock, P. M., I gave her *Sticta* tincture, a few drops in a tumbler of water, a teaspoonful to be taken every half hour. The next morning she coughed but very little, said she was well, and the medicine was discontinued.

A few days after she was caught out in the rain, got her feet wet, took a severe cold, and coughed worse than before. In the evening I gave her *Sticta* as before; the cough ceased after she had taken a few doses; and the next morning she was feeling quite well.

4. January, 1860, Mr. B——, aged fifty-six years, was suffering from soreness of the throat of long standing, I gave *Mercurius* 3, with favorable results. A few days after I found him suffering from coryza—I gave him *Sticta* 0, a few drops in a tumbler of water, a teaspoonful to be taken every hour. But a few doses had been taken when great relief was experienced. He had been subject to frequent attacks of a similar character for ten or fifteen years. I continued the remedy, night and morning, for a week or more, as it appeared to affect his throat &

* From N. American Journal of Homœopathy (*Sticta Sylvatica*.)

vorably. While taking the remedy, he was exposed a good deal, and took a severe cold; but he was entirely free from those distressing symptoms of coryza, which had for many years accompanied the slightest cold.

He had been treated by several homœopathic physicians, besides taking quantities of allopathic medicines; but he had never experienced any decided benefit from any of them.

In February following, he had a slight attack, and I gave him *Sticta* tincture as before. He said the first dose gave him great relief. This was in the evening. The next morning he was entirely free from all traces of the troubles of the previous evening. I met him almost daily for nearly two years after, during which time he had no return of the disease.

5. The next case was that of a young lady who was subject to coryza. During one of these attacks, which came on in the morning, I was requested to see her. In the afternoon I found her sneezing almost incessantly, with a feeling of fullness in the right side of the forehead, extending down to the root of the nose, with tingling in the right side of the nose. *Sticta* tincture was given as in previous cases. Two doses effected the cure, and the next day she was feeling perfectly well. Previous attacks lasted from three days to a week.

6. August 21st, 1862. Mr. F——, aged fifty years, came to me, saying he had rheumatism all over him, and could get no relief; he said he had tried everything, had been to two or three allopathic physicians, but was getting worse every day. His troubles commenced about six months ago, with sharp, darting, lancinating pain, first in the knee-joints, then in the elbow and shoulder. The finger-joints were next involved, and it gradually extended to every joint in the body; the pain in the neck and head were intense. At the present time the joints are all swollen and stiff. He cannot sleep for the pain, and can scarcely walk.

By comparing the above with the provings of *Sticta Sylvatica*, I found a perfect type of the disease before me in this drug, and I at once determined to test its curative power; the following are the results:—I gave *Sticta* 1st, five drops to a tumbler two-thirds full of water, a tablespoonful to be taken every hour.

August 23. Mr. F—— reports himself greatly improved, pains not so severe, has slept better. *Sticta* 1st, as before.

Aug. 26th. Reports a great deal better, can walk better than at any time during the past five months; pain in the head and neck gone; all the pains are less severe, and the joints are not so much swollen. Continued *Sticta*, 1st, as before.

Aug. 28. Reports himself entirely well; has no pain; swelling all gone; says he feels better than at any time during the past nine months; stiffness of the joints all gone; he is getting young again, and walks as sprightly as a young man.

7. At the time the above was under treatment, I was also treating a Mrs. G——, age about forty, for rheumatism of the wrist-joints. She had been under treatment for nearly three months, with very little, if any, improvement. The wrists and hands were swollen, with little if any redness; very painful on moving them. I had given her nearly all the remedies that are usually given in rheumatic troubles; none of them had afforded relief to any extent.

After the results produced in the last case by *Sticta*, I determined to try it in the case of Mrs. G——. I accordingly gave her five drops, 1st, in a tumbler of water, a tablespoonful every two hours. On the second day after, I called, and on entering her room, she exclaimed, "Doctor, you have done it this time!" To my great surprise, I found her sewing. The pain and swelling were nearly gone. *Sticta*, 1st, was continued for a few days, and the cure was permanent. (This last case is reported from memory.)

8. Aug. 26th. Mrs. M—— came to me, complaining of headache with severe pain in the eyes, which felt very sore on closing the lids or turning the eye-ball. The pains and soreness as she described them, were very similar to those I experienced while making the above provings, and I prescribed *Sticta*, 1st, five drops to a tumbler of water, a tablespoonful to be taken every two hours.

Aug. 27th. Reports greatly relieved soon after taking the medicine. *Sticta* continued as before.

Aug. 28th. Reports perfectly well.

9. In the month of February, 1862, while treating a patient very susceptible to the influence of medicine, I had administered *Sticta* 1-10. Very soon after taking it she said, "Doctor, I feel that medicine all over me." In a few months after, she said her leg felt as though it was floating in the air, feeling light and airy, without any sensation of resting upon the bed; this continued for some time, and gradually passed off.

10. Mrs. F——, age about forty years, had hæmorrhage from the bowels. She had lost large quantities of blood during the two previous weeks, looked pale and ghastly, and could scarcely walk, she had become so reduced. I gave *Hamamelis*, which arrested the hæmorrhage; but she could not sleep, and had not for over a week; saying that as soon as it came night, her feet and legs would dance and jump around in spite of her; so that she was compelled either to hold them down upon the floor with her own

hands, or have some one hold them for her; and as soon as she would lie down, her limbs felt as though they were floating in the air as light as feathers. This brought to mind what had happened to the last patient, and I administered *Sticta* 1st, a few drops in a tumbler of water. To commence taking a tablespoonful as soon as the above symptoms should re-appear, and repeat every hour.

The next evening at about 6 o'clock, the dancing commenced. The medicine was repeated every hour until 11 o'clock, when she slept for the first time in over a week, did not awaken until seven next morning. Medicine discontinued during the day.

Next evening symptoms returned, but not so severe. Medicine repeated every hour. Fell asleep at 10, P.M. Slept quietly until awakened next morning.

Next evening slight recurrence. Two or three doses of *Sticta* were given, and she slept quietly all night.

Next evening no recurrence; *Sticta* one or two doses; slept at 7, P.M., did not awaken until the next morning. Medicine discontinued. Recovery rapid without any further medication.

11. A lady about fifty years of age, complaining of attacks of great anxiety about the heart. Very nervous. Had had a good deal of mental trouble.

Ignatia and *Digitalis* afforded great relief; but after two or three months she called, saying that she was troubled at night by awaking with a strange sensation about the heart, and for a few moments after she would feel as though she was floating in the air. A few doses of *Sticta* 1st, effected a complete cure.

In coughs and colds, it has proved very efficient. And I have never used a remedy which has been so efficacious in procuring quiet, refreshing sleep as *Sticta*. I have given it when all other remedies have failed, and have never, save in one or two cases, had it disappoint me; and now if I have a patient who cannot sleep, it is my first resort.

I have reported two cases of rheumatism which it has cured almost by magic. I have also given it in several cases in which it produced not the slightest effect; but in these cases there was not a perfect representation of the drug in the disease.

The following cases are from the Case Book of the *Northern Homœopathic Dispensary*, New York, where this remedy has acquired some reputation:

1. Ellen Murphy, aged nineteen, scrofulous; had hæmoptysis three years ago. Every cold, damp spell brings on cough with expectorations of dark blood. Suffers now with loose cough in the morning, expectoration less free during the day; pain in left

side below the scapula, foul taste in the mouth, tickling in the larynx and bronchia; costiveness; courses regular. *Bry.* 8.

Aug. 5. Pain in the left side less, other state the same. *Sticta* 1. Aug. 8. Great relief. Aug. 12. Nervous headache which she complained of in the temples improved. Cough steadily improving. *Sticta.* Aug. 20. Cured.

2. Anna Ernst, aged fifty-one, oppression in the pit of the stomach; great thirst, no appetite, tongue clean, disgust for food; soft cough with expectoration. Vertigo, restless at night. *Bry.* 3.

Aug. 5. Some relief. *Bry.* 12. Aug. 9. Cough the same. Morning cough. Symptoms of change of life. *Sticta* 1. Aug. 19. Cough improving. Raises more easily, especially mornings. *Sticta* 1. Aug. 29. Cough well. Only some vertigo yet. *Puls.* 6. Aug. 31. Cough all right. Vertigo the same. *Cyclamen* 3.

3. Joseph Weidner, aged forty. Dyspepsia. Cannot bear anything tight on the stomach. Vomits phlegm. Hæmorrhoids. *Nux.*

Aug. 8. Cough raw and sore. Better otherwise. *Sticta.* Aug. 11. Cough only after meals. *Bry.* Aug. 16. Cough easier, but very hoarse. *Puls.* Aug. 20. Cough worse, expectoration tighter. *Bry.* Aug. 24. Morning cough continues. Well every other way. *Bry.*

4. Ellen Minaman, aged twenty-five. Cough for six weeks. Hoarseness; nightly expectoration of whitish phlegm. *Sticta.*

Aug. 12. Greatly improved. Don't cough near so much. *Sticta.*

5. Ida Hatfield, eighteen months old. Tussis morbillosa. Had measles two weeks ago. *Sticta.*

Aug. 8. Greatly improved, *Sticta.* Aug. 17. Has whooping cough. *Sticta.* Aug. 19. State the same. Worse at night. *Corallia* 30. Aug. 24. State the same. *Bell., Ipec.* Aug. 29. Improving. *Bell., Ipec.*

6. Kate Winkler, aged fourteen. Nasal catarrh. Nose always dry and stuffed up; swollen with tickling in it. Constant dripping down throat, which feels and looks raw. Tongue clean. *Sticta.*

Aug. 9. Improving. *Sticta.* Aug. 12. Discharges a great deal of phlegm, with great improvement. *Sticta.* Aug. 19. Is getting well. *Sticta.*

7. Martin Wyman, aged two years, febris catarrhalis. *Acon.* Aug. 15. Less fever. Rattling in the chest, coryza. *Sticta.* Aug. 18. Improving. *Sticta.* Aug. 21. Cured.

We cured a great many such cases with *Sticta.*

8. Magd. Hauser, aged forty-two. Influenza. *Sticta.* Sept. 29. Cough gone. Pressure in the chest and abdomen, more

the left side. Caught cold when her courses were on. *Sticta*. Oct. 1. Cured.

9. Emma Russ, aged sixteen years, otalgia, noise and beating in the back part of the head. Pimples on the face. *Sticta*. Sept. 11. Well, except the pimples. *Sepia* 30.

10. Louis Walker, aged thirty-six. Influenza with bilious diarrhoea. *Sticta*. Sept. 7. Improving. *Sticta*. 9th, cured.

11. Anne Wiebold, thirty-five years old. Loose cough with free expectoration. Worse from midnight to morning. *Sticta*. Sept. 9. Cured.

12. William Coleman, aged 66. Coryza, the result of sunstroke, comes back every middle of August, when not exposed; if exposed to the sun in July, it comes on then. Itching in the nose. When careless, it goes to the chest. Suffers now severely with it in the chest and head. *Sticta*.

Aug. 31. No better. *Acon*. 8. Sept. 3. Greatly improved. *Acon*. Sept. 5. Cured; never before cured in so short a time.

13. Stephen McCus, aged four years, had measles five weeks ago, which never came out well. Cough worse night and morning; diarrhoea with pain before each passage, worse in the morning; some emaciation; restless sleep on account of the cough. *Sticta*. Sept. 15-29. Steady improvement and cure. *Sticta* 1.

14. John Holt, aged seven years. Barking cough like whooping cough, from catching cold. Cured by *Sticta* in a few days.

15. Rose Casn, aged thirteen years. Sept. 28. Had small-pox a few weeks ago, and has ophthalmia variolosa yet. Conjunctiva inflamed. Says she cannot see plainly. Pains worse when shutting the eyes. *Sticta*.

Sept. 28. Great improvement. Ball clearer; vessels in the lower part of the eye full yet. *Sticta*. Sept. 29. Improvement continues. *Sticta*. Oct. 3. Caught fresh cold. Keratitis and conjunctivitis with great photophobia. *Acon*. followed by *Apis*. Oct. 4. Improving. *Apis*. Nov. 6. Was nearly well, till she caught cold again; has now conjunctivitis, burning pains, photophobia, hepatic eruption on the face. *Apis* during the day, *Tr. Sulph.* at night. Oct. 12. Improvement. *Sulph.* Nov 4th. Cured.

16. Peter Weidman, aged forty-three. Oct. 1. Influenza, when cough comes on he can hardly breathe, choking sensation in the throat, free expectoration; slimy coated tongue with indigestion. *Sticta*. Oct. 2. State the same. *Sticta*. Oct. 4. No improvement. *Bry.*, *Merc.* Oct. 6. Cured.

17. Philip West, aged seven months. Oct. 8. Diarrhoea mucosa, and loose cough. *Sticta*. Oct. 5-6. Some rattling in the throat yet. Cough and diarrhoea improv-

ing. *Sticta*. Oct. 7. Only restless at night now. Oct. 9. Cured.

18. Julie Eitler, aged nine months. Oct. 22. Diarrhoea, dentition, cough, and rattling in the chest. Passages green, like chopped eggs. *Sticta*. Oct. 24. Diarrhoea improving, but cough the same still. *Sulph.* Nov. 4. Slimy diarrhoea again. Cough abating. *Sulph.* Nov. 12. Cured.

19. Charles Bennet, aged twelve years. Oct. 26. Catarrh of the head for four years. Sneezing mornings with green discharges; frontal headache and epistaxis. *Sticta*. Oct. 25. Less bleeding from the nose. Left foot and right arm often benumbed and cold. *Sticta*. Nov. 4. Free from catarrh, but full of boils. *Sticta*. Nov. 20. Entirely well.

CRIMINAL ABORTION.

A CASE FROM PRACTICE.

For the Homœopathic Observer.

About mid-night, on the evening of the 3rd of December, 1862, a rough looking fellow rushed into my office and asked my immediate attendance on a woman supposed to be dying. Making a few preparations, we hurried away, my guide leading me to the most obscure part of the City. We at length arrived at one of many similar buildings in a locality wherein but little comfort reigned. Passing through a large, vacant room into a still larger apartment, dimly lighted by a single candle, we hesitated in the partial obscurity to glance around us. The dusky outlines of two, or three women huddled together in one corner, and a bed, tattered and ragged, with the white face of the sick woman—whiter in the gloom, gradually broke upon us. Moving towards the pallet and taking the feeble wrist in my hand I involuntarily exclaimed "*You have lost blood!*" "*Hush! Doctor,*" she half whispered, in a quick, startled way. Asking those present to leave the room, she besought me to sit near her until she had told me her story. And such a tale!

'Twas public at the time and no hand was raised to smite the infamous wretch who had dishonored a brave soldier, nor any attempt made to arrest the ruinous career of a professional murderer.

Her words need no repetition. The *modus operandi* of the abortion and its after-treatment is all that is now necessary. The woman had been under a course of treatment for that purpose during the week previous—taking all sorts of decoctions and poisonous compounds. On the morning of the 2d—being in the fifth month of her pregnancy—her pains commenced and went on very favorably for a time. Suddenly they ceased, and becoming anxious, she sent her child of ten

years for the physician, Dr. ———. He called and angrily demanded what she wanted. Having heard the effect of his murderous drugs, he made an examination. Again introducing his hand he tore away the foetus, bringing down the uterus with it. The woman said, "he brought out everything in one bunch."

Accomplishing this he proceeded to leave her thus, when she cried out "For God's sake! Doctor, don't leave me yet. The neighbors will come in and discover the clothes." Brutally he turned upon her and ordered her out of bed! She urged that it would kill her, when he raised her in his arms and threw her bodily upon the floor. Changing the sheets, he again insisted on her returning to the pallet. Seeing her exhausted, he with an oath, cast her back as harshly, and thus he left her, mocking her as he past through the door-way. The foetus was subsequently discovered in the adjoining alley, and rescued from some hogs that had been eating it. She told me this, and more, much more, sentence by sentence, gasping for breath. Her skin was hot, dry, burning—the palms of the hands having that peculiar damp, clammy feel. The eyes shone with an unearthly brilliance, and the tongue and lips were parched dry and glistening. Pulse, thread-like, scarcely perceptible; excessive tenderness in the abdomen with tympanitis. An examination revealed the fiercest blaze of inflammation, with half-protruding uterus. The touch caused agonizing pain, but I determined to hazard danger and convulsions and carry the uterus back to its place.

Cautiously as possible, and slowly, I moved it and supported it but very little when it started from my touch. She suffered much in that brief space and so did I. Then made an application of Arnicated water and ordered the parts to be bathed therewith. Prescribed Aconite 1st, and Bryonia 1st. German Tinctures, several drops in separate glasses, two teaspoonfuls in alternation every hour. December 4th, found her improving—inflammation decreased—tympanitis very suspicious. Continue same remedies. Called at noon and found a congregation of women around my patient, some talking and laughing,—others exhorting,—some charitable souls *pumping* her! Turned the congregation out, and found my patient rushing into a fiercer inflammation and delirium. Prescribed Aconite as before, and substituted Rhus. Tox. 1st for Bryonia, for the tongue was brown and very dry, and the eyes were dull and congested in that delirium. In the evening she was about the same—continued the medicine. Dec. 5th, patient much better; occasional delirium; light perspiration on forehead; tongue moist; tympanitis and tenderness much

lessened. At noon found that the women had been there again, but patient continued to improve.

In the evening she complained of constant desire to void urine with discharge of small quantity with burning and pain. Cantharis 3rd, occasionally and continued first prescription of Aconite and Bryonia. From this date she improved slowly but steadily, without any untoward event occurring. The prescription last given was not changed until the last few days when I exchanged Arsenicum Alb. 3rd, for Aconite. She was dismissed on the 12th December.

January 30th, 1864.

QUILL.

ARSENICAL POISONING.

BY F. A. BENHAM, M. D.

From my Clinical Record.

While residing in Chicago in 1861, I was summoned in great haste, one morning, to attend a family, residing on Second street. On reaching the house, I found the entire family, consisting of father, mother, and a daughter, aged seventeen years, in apparent great distress. They were all prostrate—retching violently, and piteously crying for help. The face and extremities of mother and daughter were covered with a cold perspiration, upper and lower extremities convulsed and severe burning, cramping pains in the region of the stomach. In the case of the mother there were great prostration, violent burning in stomach and œsophagus, excessive thirst, extreme dyspnea and slight convulsions. The most marked condition in *this* case was excessive *vertigo*; the patient would frequently exclaim: "*the bed is tipping over, I shall fall on the floor.*"

In the case of the daughter, who possessed a decidedly nervous temperament, most of the above conditions were present, but in less degree. There were excessive nervous irritability, subsultus tendinum, a violent pressive pain in the head, and general coldness of the person. This patient complained most of an intolerable burning, *pricking* pain in the stomach, as she expressed it: there was a sensation as though a "*thousand red hot needles were sticking through the stomach.*"

In the case of the father, the conditions were far less strongly marked, but still the same general features were present.

It has been thought that *belladonna* is a prophylactic against scarlatina.

My experience is equivocal. In a family of seven sons the eldest had scarlatina, and I at once gave *bel.* to the six younger sons, and not one of them took the disease. Again, in a family of six children, when the disease had made its appearance among them, I gave *bel.* to those not affected, but without any advantage, as in the course of two or three weeks they were all laid down in succession, but all recovered. The epidemic here referred to yielded to *acon.*, *bel.* and *mercurius*.

But I have thought it right to put *apis* on its trial as a protective—thus far I can speak well of it, but truth compels me to say my experience is not sufficiently extended to enable me to speak with any degree of certainty or dogmatism.

A youth, aged 13, (one of a family of seven children), is now recovering from a severe attack of scarlatina. He took *apis* only, and although the throat was severely attacked, there has not been the slightest tendency to *glandular* affection. I put the whole household under the influence of our medicine, and there has been no infection communicated—but then we are not yet out of the wood*.

I hope after a time to give some supplementary observations and results of treatment of scarlatina with *apis*. To half a dozen inquiries made by me amongst homœopathic physicians in the West, I have had replies that they have not used *apis* in the *eruptive stage* of scarlatina. I would venture to hope that the medicine will be put to the test most rigidly, and I am sanguine enough to think that in those epidemics of this frightful malady in which *belladonna* fails, the remedy I have mentioned will be found a most useful source.

Finally, it might be alleged, nay, it has been alleged, that the fact of bee poison modifying the condition of the skin when injected by the sting of the insect affords no proof that as a medicine received into the stomach it can have active powers of any kind. But I cannot agree with this opinion. The history of *lachesis* and other animal poisons is quite conclusive in an opposite direction, and my clinical experience may also be taken for as much as it is worth.

* Since the above was written, a little girl, aged 3 years, of the same family, has passed through the disease in a highly favorable manner. How far the disease was modified in consequence of her taking bee poison during the week before her attack, it is impossible to speak with any degree of certainty.—Dec. 12th, 1863.

AN ANCIENT TEMPLE AND ITS PRIESTS.

A medical friend, under date February 15th, 1864, says: I went to see a case last night, which had been most ignorantly and intolerably abused by Allopathy, *i. e.* mistaking and calling Scarlatina, *Bilious fever!* The mistake cost the child its life, no more." His indignation finds vent in the following paper.

The delicate but impenetrable veil thrown round the Art of Medicine in earliest ages, still clings to its giant proportions, and wraps its mysteries in a more than Pythagorean secrecy. The gloom and obscurity "of times before Œdippus and Priam—before Troy, before Tyre"—falling thickly around the origin of this Child of Superstition, shuts from our view of its infancy aught but its hideous nurse—Empiricism. Twin-sister of ancient religion, 'twas entwined about every pillar of state;—was fastened and nurtured in magnificent temples, and thus planted its power deep in the hearts, imagination and fear of the people. The dim and lessening figures of Egyptian and Grecian priesthood are first seen in the distance, consecrating the cornerstone of the stupendous edifice. Cnidian, Asclepiades, and the Alexandrian school reared its mighty walls. Tracery and hieroglyphic symbols of Astrology and necromantic signs were scattered over its surface by the hands of Rhazes and his Arabian scholars. Hippocrates, Galen and Avicenna, Celsus, Harvey and Sydenham dawned upon the world, and the temple was finished. Thousands have since sacrificed and been sacrificed within the shadows of its sacred fane. The steps of its altars have been crowded with men teaching its tenets, promulgating new doctrines, startling theories. Dashed from their places in the hurry of time, others filled their positions, and, but half clinging to remnants of the past, taught still stranger methods. The sick were the recipients of these theories, methods and conglomerate of theories. Revolutions swept past. Medical dynasties arose and fell, and the sick knew not the change. The sick man only tested their dogmas and simply died under the proving. The invalid's "time had come," and the priests of the temple could avail naught. But this was gaining experience—experience which crowded the crypts, the aisles, the altars, and the holy places with vast piles of crudest evidence, verifying, or denying the fearful bequests of traditionary lore. Medicine, Astrology, Chemistry and Necromancy, entangled in one inextricable, chaotic

mass! And upon this "confusion worse confounded" were nurtured their "oldest authorities." No single ray of simple, uncomplicated Truth ever stole through this chaos to give life and warmth to doubting modern. From this vulgar, decomposing hash the puzzled disciple steals the elixir of—Death. The patient's fate and his own surprise whisper no doubt of his "authority," for those old tomes and sacred records have prescribed the legality of the sick man's exit. Now and then, perhaps, one is found whom the world loves and honors for his charity and his learning; who wraps his weakness in a dignity of demeanor, while he inly sorrows over the confusion that mocks and baffles his every effort.

Often hushed voices whisper agonizing doubts as he bends o'er his dying patient. Repetition and practice down the tormentors, and an accumulating fortune justifies him. Other bold spirits have sprung aside from the beaten pathway, and writhing under the cruel weight of their horrid incubus, have attempted to cast down their old idol and found a healing power. They were too daring men—men of genius and charity—men who cared more for the welfare of their fellows than for the teachings of old time. The united medical world demanded their sacrifice ere an *exposé* rent in twain the foundations of their guilty edifice. These brave men, earnestly seeking the truth outside the legalized mass of mouldering corruption, met only taunts and scorn and contemptably unbearable. 'Tis true they found not the truth—preached not the truth—but their's was the earnest endeavor, and their's the immolation. Their books, their labors, sifted of many of the old falsities, were cast aside, unread and untested by a frightened, ignorant public ever an enemy to innovations. Paracelsus, the genius, saw the rushing ruin, and raised his hand to stem the torrent. It bore him down and swept over him, and an undiscerning people mocked Paracelsus the vagabond. Van Helmont, wearied and saddened, and almost enveloped in the dark gloom of despair, cried, "Medicine makes no progress—it turns upon its own axis," and worshipped no more in the Temple. Iamblique, in his sorrowful confession of weakness—in his humiliating admission of failing resources—thus apostrophizes: "Medicine, the daughter of dreams!" Thousands of conscientious, venturesome sons have in all times left its protective shade and braved a terrible wrath. This very day the medical dignitary, the High Priest of the Temple, is its victim for daring to depart from its time-worn dogma. Hammond dared proscribe but two remedies more fearful in their action than all the guns of the foe—and dire the confusion wrought! Now a court-martial tries him for

trumped up causes—arraigns him for erring in old rules, but for humanity's sake!

But we will leave this single instance to wander through some of our villages and towns to find evidence of the "rotteness in Denmark." Every village has its dozen clashing representatives of medicine—Allopath and Homœopath, Hydropath and Botanic, Eclectic and Baunscheidt, Gog and Magog, and the strife never ceases. The decrepit Old Gentleman, wrapt in his own decay, shuffles along in forced unconsciousness of the Titan by his side, vigorous, polished and refined, creating a new world to usurp his old. The dripping hybrid splashes "Roots and Yarbs," while the Old Woman gives each a prick with her bunch of needles as she passes along. But, pshaw! go into their offices, and you will find the very atmosphere of their books heavy with the mockeries of their profession.

Many of the text-books of their student days were thrown aside in earnest endeavor to win forgetfulness of the knowledge that gained their diploma. New works are impatiently seized and ransacked for the truth which they do not contain. Their early enthusiasm is rudely smothered, yet, accepting all doubts—gathering up the burden of their fears and tremblings—they permit themselves to glide along on the surface of that stream which wafts a few physicians to eminence and thousands of patients the world over to life everlasting.

Honest priests, conscious of the weakness of their art, have sought to bury the conviction deep in their own hearts, or whisper it in secret conclave lest the tumbling ruin come toppling down upon them. While standing in the dark shadows of their temple, or cautiously guiding their footsteps among its numberless dangers, their feelings must be akin to those the frightened traveler experiences as he hurries through the Pontine Marshes, casting fearful glances on every side, and tremblingly expecting the grasp of the evil thing that reigns there. 'Tis thus only with a few. Hundreds have commenced in ignorance too thick for moral inconvenience, and in ignorance will they die. Here, indeed, ignorance is bliss. They see not the curse and the woe in their trust in "oldest authorities." Faith in old authors is inculcated in their student days, and the eloquence and love of College Professors make permanent the awe. Common sense and self-reliance would be schismatic if they conflicted with long since exploded *dicta*. They illustrate their blind faith by prescribing in their own families! Holmes knew better, and would pitch it "all into the sea" were it not that his professional chair might go with it into the *melee*. What a din of discontent would resound through the land!

What clouds of dust and mould, centuries old, would rise heavenward from amid falling ruins did physicians but "do all that men dare do." Bright, warm, revivifying rays of sunlight would steal in, and dispelling delusion and doubt, make clear and truthful the course of old medicine, which flows heavily, sluggishly by

"Like a great river rich with dead men's souls."

VERITAS.

For the Observer.

SENECIO GRACILIS.

Senecio Gracilis in Dysmenorrhœa.

BY E. M. HALE, M. D., CHICAGO, ILL.

The following clinical experience seems to show that the name of "Female Regulator" vulgarly applied to this medicine, is not inaptly applied.

A lady, the mother of one child, had had an abortion three years ago, and another—at the second month of pregnancy—four months since. Since the date of the last abortion she had suffered much from painful menstruation, which had not been the case previously.

The menses came on too soon—every three weeks; were very profuse, lasting eight or nine days; and were accompanied with a great deal of pain, of a cutting, grinding character, referred to the region of the sacrum, hypogastrium and groins. She was pale, weak, and "nervous," and had a slight cough, generally at night.

Thinking this a good case in which to test the vaunted virtues of the *Senecio gracilis*, I prescribed five drops of the mother tincture three times a day, and continuing its use until the next menstrual period.

To the patient's gratification and my own, the menses appeared at their proper time (in 29 days), and were normal in quantity, and unaccompanied with pain or suffering of any kind.

SENECIO GRACILIS IN HÆMOPTYSIS.

BY DR. THOMAS IRISH.

In the year 1822, in the State of New York, I was taken suddenly with *profuse hæmorrhage from the left lung*. Physicians

were sent for; consultation took place; they manifested much wisdom in endeavoring to stay the red current of life by tapping my arm; the blood refused to flow in that direction, but the lung continued to perform its office in opposition to these endeavors to change its current, by cutting the jugular vein. All to no purpose; the life current continued to flow until it would hardly stain a white cloth. They gave me up as lost without hope, and then gave rules and ordered medicine taken. I refused to take medicine. I became a living skeleton; the dry, hacking cough, the hectic flush and sleepless nights were my companions for day and night for about five months, and still living in opposition to the wisdom of the prophets, I was in the daily habit of wandering about the fields on my father's farm, and pulling and tasting of roots and herbs. The *Senecio* was before me, near a small stream. I tasted and was impressed to try its virtues. I had it gathered, roots and tops—a pailful, and prepared a strong decoction, of which I took half a tablespoonful four times a day. Improvement commenced soon after commencing the use of the *Senecio*. In six weeks the cure seemed complete. This was in the fall. I continued well through the winter. In the spring went to work; in a month was prostrated by hæmorrhage from the lung again; continued to work until fall. Again the life root was taken by chewing the root and drinking a tea of the same. Again, contrary to the expectation of all, health was mine in the spring of 1824. I came to Michigan; worked hard all summer; in fall was taken sick; continued feeble until spring. At every attack of the disease the lungs would sympathize, so as to have it terminate in a lung fever with bloody expectoration. I employed no physician, but always used the Cure-All, as I often called it. In the too free use of the *green root* it proved a laxative, which was not favorable to the healing process. At every attack, for eleven years or more, of lung fever, which were many, I always used the same remedy with the same success. I have never known it used in such attacks without some benefit, and the number would be hundreds.

I saw the blood spin the size of a common straw from a cut in the leg. The Senecio, roots and tops bruised and applied immediately stopped the blood; it was the only dressing. The person was not kept from his work an hour in all; it was a bad cut, and healed in a few days. It is the best dressing for cuts, bruises and sores, known to me. It has more power over diseases of the *Uterine Organs* than any other medicinal plant, in my opinion. In Erysipelas it has with me proved a useful remedy, internally and externally. The use of alcohol is indicated in small doses for inflammation, when the improper use of spirits was the cause, as much as fire to a burn or cold application to frozen limbs.

MORTALITIES OF CITIES IN 1863.

The following, which we find in the Providence (R. I.) Journal, is attributed, by the Medical and Surgical Reporter, to Dr. E. M. Snow, of that city:

The year 1863 was marked by an increased, and in some respects, remarkable mortality throughout the country, in the rural districts as well as in cities. There appears to have been no general, or wide-spread epidemic, but a general increase of mortality from all causes. In some sections of New England and in other States, there were severe endemics of diphtheria, scarlatina, typhoid fever, and spotted fever, and during the present winter there is existing a general epidemic of influenza, commonly, but improperly, attributed to "taking cold." This has largely increased the mortality of aged persons, and in some places has proved fatal to many of the middle-aged.

The following table shows the number of deaths, and proportion of deaths to population, in a few cities in 1863:

	Estimated population.	Deaths, 1863.	Of population one in
New York.....	900,000	25,196	35.7
Philadelphia	620,000	14,220	43.6
Boston	194,000	4,698	41.2
Newark, N. J.	85,000	1,952	43.5
Providence.....	55,000	1,214	45.3
Hartford.....	32,000	583	54.8
Newport	12,000	364	32.9

The increase in 1863, in the number of deaths, over the previous year, was as follows:

New York, increase 3,592, or 18.60 per cent.

Philadelphia, increase 691, or 4.57 per cent

Boston, increase 578, or 14.02 per cent.

Providence, increase 300, or 32.82 per cent.

Newport, increase 176, or 93.61 per cent.

The population of the cities is given at an increase of about ten per cent on the population in 1860. Some of the cities claim a much greater increase without sufficient reason as we think.

EDINBURGH MEDICAL MISSIONARY SOCIETY.

Its objects are:

1. To remind members of the medical profession of the influence which they possess, and the great responsibility in using it.

2. To encourage, by the expression of Christian sympathy, and by donations of surgical instruments, books and medicines, those of our brethren who may be acting as missionaries in foreign lands.

3. To assist in adding to the number of such devoted men, by pointing out the field to students and others, by helping them to prepare for it, and, if possible, by sustaining them when they have entered it.

4. By extending to the sick and suffering in heathen lands the substantial benefits of British surgery and medicine, in the hope also of some reciprocal advantage in the discovery and importation from abroad of new remedial agents.

CATARRH.—Dr. John Doy reports that William Birch, wagon-maker, aged 20, had for nearly two years a most distressing catarrh in the head; a pain mostly between the eyes, so much so that for a long time he discontinued work. Sometimes he blew out thick, yellow chunks; at other times, small, round particles, containing odor like old cheese. Had also a soreness at the back of the head. Put him on Arsenicum 2nd and Belladonna 2nd, teaspoonful every two hours alternately. In two months perfectly cured.

We presume that *Arsenicum* was the true curative in this case. We have known Arsenicum to remove Catarrh of the most offensive character, and where foetor is a prominent symptom, we presume Arsenicum is preferable to either *Sticta*, *Pulsatilla*, &c.

CUCURBITA PEPO SEMEN, for the expulsion of Tape Worm.—Dr. A. M. Vedder reports to the *American Medical Times* the expulsion of a tape worm 18 feet nine inches long after administration of three tablespoonfuls of

the seeds previously peeled, dried, pulverized and mixed with sugar. The patient took also five ounces of oil, fasting 50 hours. He says "To get the curative effect of pumpkin seeds, absolute fasting is a *sine quâ non*." Turpentine, santonine, and male fern had been previously administered in this case without avail.

THE THYROID GLAND.—We are pleased to learn that Dr. A. J. Murch has been engaged for the last two months in experimenting with the Flouride of Calcium upon a small dog. During the time the gland has grown to nearly four or five times its former size, and the dog, a rat terrier, has become less active than usual. The dose given has averaged above one grain per day. We invite the attention of the profession to this drug, as well as to the Flouride of Sodium. Careful experimentation may lead to the discovery of a more reliable remedy for Goitre than any we now have.

THE HOMŒOPATHIC OBSERVER (British), edited by "The Honorary Medical Officers of the Manchester and Salford Homœopathic Dispensary," published by Messrs. H. Turner & Co., London and Manchester, England, comes to us with the following notice:

"Homœopathic Observer,"—edited by E. A. Lodge, No. 266 Jefferson avenue, Detroit, Michigan. We have received the first number of this new American periodical. It will be published monthly, and consists of 16 pages, printed in double columns. The contents are varied and interesting, and we hope our contemporary will have a large circulation. As our journal has a prior claim to the title adopted by this publication, we would suggest that it be distinguished by the prefix, "The American."

We feel much obliged to our English brethren for their commendatory notice, and adopt their suggestion with pleasure. There appears also to us to be a particular propriety in the title of "*AMERICAN Homœopathic Observer*," as so much of our labors will be given to bringing out prominently to the profession the value of American medicinal agents. In this work we invite the hearty co-operation of every earnest Homœopath. Let each of our subscribers *prove*, on his own person, as well as on others, some of our indigenous plants, and report.

SUPERIORITY OF VULCANIZED CAOUTCHOUC OVER ANY OTHER SUBSTANCE FOR THE FABRICATION OF BOUGIES.—Professor Nelaton has recently shown the superiority of vulcanized

India rubber for catheters and bougies over the instruments in common use made of tissue coated with oil mixed with litharge. The large are rigid, liable to give rise to false passages, cause pain, and when permanently left in the urethra, exercise a degree of pressure which may induce mortification and perforation. In a few days, moreover, they are deteriorated by humidity. Vulcanized India rubber sounds, on the contrary, are perfectly flexible and unchangeable. They are inserted with greater ease, and cause so little distress, that they may be preserved in the urethra during a journey without any inconvenience. They are not affected by moisture, and one of these instruments which remained in the urethra twelve days, in one of M. Nelaton's cases, when withdrawn presented no sign of outward injury, and was as smooth as before its introduction.—*Jour. de Med et Chir*

CEREBRO-SPINAL MENINGITIS.

The profession seems to be settling down to the belief, that the anomalous disease which has been prevailing endemically in some parts of the country for the past year or more under the various names of "Spotted Fever," "Malignant Scarlatina," "Malignant Typhus, etc., is Cerebro-Spinal Meningitis. It is, however, due to the profession that a full history of the disease, its symptoms, course, progress and treatment should be published. The accounts published so far, are very meagre and unsatisfactory.

The disease is steadily progressing, carrying off, if we are correctly informed, some members of our own profession. When at the meeting of the Medical Society of the State of New York last week, we heard of it as prevailing in some portions of that State. There has been a good deal of it in this city, principally in the rural portions and suburban villages. It also appears to be prevailing in the Southern States, having been very fatal in and around Rome, Georgia. The Rome Courier says:

"The physicians call it *Meningitis*, and say its pathology is an inflammation of the base of the brain and the spinal nerves. The patient is attacked with a chill, accompanied with a severe pain in the head, particularly in the back part, and in the spine. The head becomes drawn back, and the patient experience pain in the neck, similar in kind to lock-jaw, and generally becomes deranged in mind. The disease generally proves fatal in from twelve to thirty-six hours. The disease is not considered contagious, though it may possibly prove epidemical."

We trust those who have an opportunity of observing and treating the disease, will give the profession the benefit of their experience.—*Medical and Surgical Reporter*.

A M E R I C A N

Homœopathic Observer.

"Similia, Similibus, Curantur."

"I present you with a Truth long sought for, a principle of eternal nature, I appeal to existing facts alone to convince you; and when a conscientious and complete course of study shall crown your researches with success, then, as I have done, bless Providence for the immense benefaction he has allowed to descend upon the earth through my humble agency, for I have been but a feeble instrument of the Omnipotence, before which we all bow in humility."

HAHNEMANN.

VOL. I.]

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EDITORIAL NOTICES.

New Work On Domestic Practice. Our esteemed friend, Dr. John Ellis, late of Detroit, but now of New York City, says that he has put the MSS. of his Domestic work in the hands of the printer. Our next number will probably contain a prospectus of this book.

Drs. Marcy and Hunt's Practice. The publisher says that "the prospectus of this work is not out yet. How soon the work itself will be out I am unable to tell with any certainty; but it will take at least two months yet."

Dr. Hale's New Provings. We are happy to be able to speak more definitely of this work. Dr. Hale is progressing with it as rapidly as proper care will permit. MSS.

of about 15 new remedies are now complete, and the work is in the hands of the printer. It will be a handsome octavo of about 350 pages, same sized page and style of type as Hahnemann's *Materia Medica Pura*, printed on superfine paper, and well bound in black cloth, title only gilt. After publication, to non-subscribers the price will be \$2 50; previous to publication, (for this month, April,) price for *OBSERVER* this year, and Hale's *New Provings*, will be only \$2 50 for both, if paid in advance. We are induced to make this offer for the following reasons: 1. The cost of publishing the *OBSERVER* and the books will be over Three Thousand Dollars, which is a considerable outlay, and we require a large amount on hand. 2. Our offer of the previous month for \$8 in advance, to furnish *OBSERVER*, Hale's *New Provings* and Hill's *Epitome*, was not responded to by many who have Dr. Hill's old edition, and do not want the new one, and our present proposition is in reply to those who inquire for what we can furnish the *OBSERVER* for 1864 and Hale's new book, without Dr. Hill's *Epitome*. We hope our friends generally will avail themselves of our liberal offer, which is equivalent to giving them the *OBSERVER* for this year.

Drs. Herring and Hale. We place the names of these two physicians together. Some of our friends would place them otherwise. We differ from them now, and the great body of the Homœopathic fraternity will doubtless hereafter agree with us in the opinion that both Dr. Herring and Dr. Hale have been actuated by one laudable motive.

—the improvement of our Homœopathic *Materia Medica*—and that they deserve our gratitude for what they have accomplished. True, Dr. Hale, *in the past*, has verged too much towards Eclecticism, and some suppose Dr. Herring has been dealing too exclusively in “high potencies.” There need be no antagonism between them. We all acknowledge Dr. Herring’s talent, and esteem his labors; and we are pleased to see that the most prominent Homœopaths in Europe, as well as the United States, recognize the genius of Prof. Hale. We do not like the tone of our correspondent, *, and we pity the spirit that sneers at the provings of our indigenous remedies, and casts them aside as “new-fangled.”

Before the publication of Dr. Hale’s Monograph on *Gelseminum*, there was the same attempt at disparagement. We were not discouraged then, and are not now. The *Gelseminum*, mainly through Dr. Hale’s labors, has been introduced and used very extensively, and is now adopted as one of the most valuable remedies of the School; and hereafter many of the articles to be included in Dr. Hale’s new book will be found worthy of a place in the Standard *Materia Medica*.

Hahnemann Medical College. *Fourth Annual Commencement.* The Valedictory addresses to the graduates were made by Profs. Hale and Colton, and diplomas received by the following gentlemen:

PETER BAKER, ANSON R. SMART,
GEORGE E. BALL, JOHN H. BEAUMONT,
RICHARD PENGELLY, E. J. FRASER.

A festival was given at the Sherman House, at which, judging from the bill of fare, some good things were disposed of; and some better things were enjoyed doubtless in the speeches of Drs. Smith, Ludlam, Lord, McAfee, Beebe and others.

We have received a package containing the addresses of Drs. Hale and Colton, which we will forward to our friends gratuitously with pleasure.

Obituary. DR. CLEMENS MARIA BENNINGHAUSEN died at Munster on January 26th, 1864, in the 79th year of his age.

WILLIAM K. HALLOCK, M.D., died at New York city, 11th February, 1864. Dr. Hallock was a son of our friend, Dr. L. HALLOCK, of New York City. After the second battle of Bull Run, hearing that the wounded were suffering for surgical attendance, he nobly volunteered his services. Loss of rest and food, with great exposure, helped to develop the disease which ended his earthly career. He was a pure patriot, a good physician, a loving husband, a devoted Christian.

We also learn with regret of the demise of our friend and correspondent, E. J. BATES, M. D. He had been suffering from Hydrothorax previous to coming to Michigan; while here he improved very much; went to Vermont; attended to his father there; was again prostrated with disease, and passed away to the realities of a more substantial state of existence.

Our friend, Dr. HENRY M. SMITH, of the *American Homœopathic Review*, has buried his mother.

Will the friends of the departed permit us to condole with them?

Dr. FRANKLIN BACHE, the oldest great-grandson of Benjamin Franklin, and a distinguished member of the medical profession, died at his residence in Philadelphia, on Saturday afternoon, after a short illness. Dr. Bache was born in Philadelphia, on the 25th of October, 1792, and was the oldest son of the oldest grandchild of Benjamin Franklin.

Dr. NORMAN JOHNSON has lost an only child, an infant of 15 months and 27 days at his death, Lord’s day evening, 27th March.

— “Even for the dead I will not bind
My soul to grief—death cannot long divide:
For it is as if the rose had climbed
My garden wall, and blossomed on the other side.”

Locations for Homœopathic Physicians. There is a call for a Homœopathic physician at PORT AUSTIN, Michigan. Write to C. H. Gallup, Esq., there. Also at the following places good Homœopathic Physicians are in demand. ST. CLAIR, county seat of St. Clair County, Michigan, 52 miles from Detroit by steamer; population 2,000. Write to John C. Clark, Esq. WYANDOTTE a manufacturing village 17 miles below Detroit; write to A. J. Folger, Esq. GOSHEN

INDIANA; write to *John Cook, Esq., Banker.* OIL CITY, PA. Dr. Cone writes: "I expect to leave this place soon in consequence of ill health. A homœopathic physician will be needed to supply my place. One of considerable experience is most desirable. The location is a very good one. The place is growing rapidly. If my health was good, I would not leave on any account. If you can send a suitable person here, please do so soon. Should you send any one, please direct him to A. Hebbard, of the Petroleum House, or my brother, A. Cone, of same house." HILLSBORO, *Montgomery County, Ill.* Write to J. Ravold, M. D., Greenville, Ill. GREEN BAY, WISCONSIN; write to Henry Pearce, M. D. Dr. Pearce would exchange a practice worth \$3,000 per annum for a location further south. *Homœopathy is the rule, not the exception, at Green Bay.*

Homœopathy in the Army. Why has the United States Government a greater right to select from a medical sect (Allopathy) all its surgeons, than it would have to choose chaplains from some one denomination? Is it just when a majority of the officers and men of a regiment desire to have a Homœopathic surgeon, that they should be told that although 999 men out of a thousand desire it, their wishes cannot be gratified, because the United States Government now employ Allopaths exclusively? Some inform us that when the war is over, the "Government will have time to consult authorities." &c. This is mere trifling. It is not the province, or the business, of our Republican Government to inquire into systems of medicine any more than into systems of Theology. It can neither have a national system of religion or *legitimately*, a national practice of medicine. Chaplains are selected according to the general wishes of a regiment, and such *should be* the rule as regards surgeons, notwithstanding the protests of declining Allopathy. Our brave boys are suffering as much from *deadly drugs* as they are from rebel bullets. Is this right?

Ups and Downs of a Doctor's Life. We are indebted to Prof. Ludlam for a copy of this admirable lecture, the greater

part of which will be found in the present number. We direct the attention of our physicians to the Professor's words of encouragement. There is a cheerful, manly tone throughout the whole which is peculiarly attractive, and our young friends will find it greatly to their advantage, throughout their professional career, to cultivate this spirit. Henry Ward Beecher says: "Cheerfulness in a man is that which, when people meet him, makes them happy. A cheerful doctor gives his medicine the moment he steps inside the room, half the time. And one of those sepulchral doctors, that carries death in his visage—I wonder that anybody gets well under his care."

Hahnemann and Homœopathy. Will the friend who borrowed the MSS. Lecture with this title oblige us by returning it immediately?

Gordon's Spring Vaccinator. See advertisement on cover. We have used this instrument with great satisfaction to ourselves, and our patients. The operation is painless, instantaneous and effectual.

Augustus Murray, M. D. Can any one give us the present address of this gentleman?

Words of Encouragement. From hundreds of letters containing encouraging words we select the following from J. F. MERRITT, M. D.:

"Immersion in business has prevented me from giving an earlier attention to returning you my dollar, and with it, and on behalf of myself and the cause at large, I will make the acknowledgments due for your efforts to supply a *desideratum* in medical journalism which has long been felt. Clinical records of cases occurring in every-day practice, in which your pages abound, are what we need to advance the interests of the profession and humanity."

Inhalation. One of our correspondents requests that those who have had experience in the use of Homœopathic remedies by Inhalation will report through the columns of the Observer.

Phytolacca Decandra. Our friend

will be gratified at hearing that Dr. L. C. RAYHOLDS is engaged in making further provings of this drug.

Imported Virus. As this article failed to work in every instance, and not wishing to keep anything that cannot always be relied upon, we shall discontinue its sale. We have vaccine that can be warranted as coming from healthy children.

New York Woman's Infirmary (Homoeopathic). Incorporated 1868. D. D. SMITH, M.D., *President*. J. W. MITCHELL, *Attending Physician*; J. F. GRAY, M.D., and E. BAYARD, M.D., *Consulting Physicians*; J. M. CARNOCHAN, M. D., and J. BRACKLEY, M.D., *Consulting Surgeons*.

We understand from *Am. H. Review* that this Institution will be ready to receive patients this spring. The undertaking is highly commendatory.

Personal. Dr. B. L. HILL is at San Juan del Sou, as United States Consul.

Dr. JAHR has been decorated with the Order of Charles III. by the Queen of Spain. He is at Basle, Switzerland.

Prof. HEMPFL is now at Grand Rapids, Michigan.

HAHNEMANN.

ANNIVERSARY OF HIS BIRTH, 10TH OF APRIL.

Hahnemann was born on the 10th of April, 1755, at Meissen, in Germany. At an early age he became very studious, and pursued his investigations under disadvantages which served to bring out the energies of his genius. On completing his collegiate education, at 20 years of age, he left his father's house for the city of Leipzig, with twenty thalers (about fifteen dollars), which was the only patrimony he ever received. While studying medicine, he obtained a subsistence by his labors as a teacher and translator. He entered upon practice after graduating, but soon "retired from the profession of medicine in disgust at its uncertainties.*" After relinquishing active practice, he devoted his attention to the translation of scientific books, and the

preparation of several works on Chemistry and Medicine. In the year 1792 he undertook the charge of an Insane Hospital in the Duchy of Saxe-Gotha; and the honor of introducing the present rational and humane treatment of the insane is to be ascribed to Hahnemann as well as to Pinel. The maniacs of the Bicêtre were unchained by Pinel about the same time that Hahnemann put into practice his own humane ideas of the treatment of lunatics, at the Asylum in Georgenthal, in the Thuringian Forest. "I never," said Hahnemann, "allow any insane person to be punished by blows or other corporeal inflictions."

Experimenting with Cinchona (Peruvian bark) in 1790, he found that it produced symptoms in the healthy organism similar to the disease—intermittent fever, which it was known to cure. Referring to this, Hahnemann says: "There dawned to me the first ray of that method of curing, which soon was brightened into the most splendid day." Pushing his researches still further he discovered that all medicines operated in a very similar manner. After a long course of careful experiments, upon himself and others, he became satisfied that medicines always cure diseases similar to those which they produce, and he then promulgated to the world the law of cure, *similia similibus curantur*, which is the foundation of our system.

[As a product of the labors of Hahnemann and his disciples, guided by this law of Nature, we have certain specific remedies which are applied with almost mathematical precision, by all those who possess the requisite knowledge.]

Hahnemann resumed his practice, and gave a semi-weekly course of Lectures, which was attended by a number of devoted students. His success excited the envy of the Allopathic physicians. The apothecaries were also angry, because Hahnemann prepared his own medicines. The physicians and apothecaries combined to prosecute Hahnemann, and finding an obsolete law, which provided that all prescriptions should be dispensed by the apothecaries, they succeeded in driving him from Leip-

* Hahnemann's Letter to Van Hufeland.

zig. In other places he also met with opposition, yet he did not falter; steadily pursuing his course and continuing his investigations, he attracted friends and disciples, as well as patients, wherever he went.

Leipzig, which once drove Hahnemann from her borders, is now the residence of many of his disciples, who practice the art with success. It has sustained a homœopathic hospital for 28 years. In 1851, its principal municipal authorities joined in the inauguration of a superb monument of bronze, erected to the memory of Hahnemann. At Leipzig is located the central homœopathic pharmacy, which supplies several thousand physicians, in different parts of the world, with the pure medicines which the practice requires.

Hahnemann pursued his investigations for over fifty years. "When," said he, "we have to do with an art, whose end is the saving of human life, any neglect to make ourselves thoroughly masters of it becomes a crime." He was noted for indomitable energy. He wrote over 70 original works on medicine and chemistry, translated 20 different books on chemistry and other subjects, proved about 90 medicines, delivered scientific lectures, and attended to a very large practice. Yet, with his multitudinous employments, he was never seen to act as in haste, or in a hurry. Many of our city doctors with but half a dozen patients, have no doubt more of the appearance of being overwhelmed with business, than Hahnemann had, when 40 or 50 carriages, with patients, attended his office in a single day. Hahnemann accomplished so much because he was always exact, orderly, systematic. He kept 36 volumes of consultation registers, in which he noted the symptoms and treatment of his patients, whether rich or poor. At 84 years of age, his handwriting was as fine as copper-plate engraving, smooth, uniform and legible; and though so far advanced in years, he wrote freely without spectacles.

In 1799, Hahnemann discovered the virtues of Belladonna as a preventive of Scarlatina. Alluding to its prophylactic powers, he says: "The furtherance of every means,

be it ever so small, that can save human life, that can bring health and security, (a God of love invented this blessed and most wondrous of arts!) should be a sacred object to the true physician; chance or the labors of a physician has discovered this one. Away, then, with all groveling passions at the altar of this sublime Godhead, whose priests we are."

On the 10th of August, 1829, Hahnemann's friends celebrated the 50th anniversary of his Doctorate. On the same day the illustrious master founded the "Central Society of German Homœopaths," which still flourishes.

In 1830, Hahnemann lost his first wife. Some few years after this event he was called upon to prescribe for a young Parisian lady, Mdle. Marie Melonie D'Herilly Gohier. She had a pulmonary affection, and disease of the heart. Hahnemann relieved her cough, notwithstanding it had been supposed by her former physicians that she was in the last stages of consumption. As for the heart disease, it must have assumed another form, for we find that, in 1855, the young Frenchwoman captivates the doctor, and takes him to Paris. Hahnemann was at that time quite wealthy, but the second wife shewed that she loved the man, and not his money, by inducing Hahnemann to settle nearly the whole of his property upon his children. Hahnemann was over three score and ten when he lost his first wife, and eighty when he married the second. 'Tis said that Mrs. H., No. 1, was a sort of Xantippe; whether this was really so we know not, but the step-mother must have been a true woman, for she was tenderly beloved by all her step-children, and very attentive to their interests.

At Paris he soon rose to great eminence, and was much esteemed by friends and patrons. In this metropolis, crowned with the honors of a useful life, he died on the 2d of July, 1843, at the age of 89.

FŒTICIDE.

Perhaps no class of professional men are entrusted with more sacred responsibilities, or are enabled to act more effectively, either

as corrupters or conservators of private and public morals, than physicians. The infirmities, the deformities, the sufferings, produced by disease—often superinduced, immediately or remotely, by folly or by sin—and which are vigilantly veiled from all others, are necessarily revealed, in entire confidence, to the physician; or are discovered by him, whether revealed or not. The honor, reputation, and peace of many are held at his disposal. He is able to teach to sufferers lessons of self-denial, of virtue, and of the tremendous effects of sin and folly, under circumstances so impressive, and sanctions so immediate and awful, and under the influence of gratitude so earnest in the hearts of his pupils for benefits conferred, as to produce instant and abiding convictions. There is, therefore, the highest demand that he should be a man of the loftiest integrity—of clean hands and a pure heart. It is perhaps not too much to say, that in view of the power in their hands, no class of men possess a more honorable record for high integrity.

But it is undeniable that the power and skill of the physician expose him to strong temptations to lend himself to shield crime and encourage iniquities over which his calling permits him to throw a professional veil of secrecy. This is especially true in regard to the crime mentioned at the head of this article.

There are many, it must be confessed, to the dishonor of human nature, who have so degraded a sense of the responsibilities of paternity and maternity, as to be willing to crush out some of the holiest instincts of nature, by destroying the legitimate fruits of wedlock; and to render their homes childless by a profane interference with the laws of the Creator. There is a large class in every community who are preserved from sensual indulgences simply by fear of the consequences; who, if such fear can be removed, have escaped the last barrier of virtue, and will rush impetuously to any excess of passion. Many, likewise, who have been hurried, in the heat of passion, into criminal acts, only awake to a sense of shame when the results of their sin are about to transpire, and a public revelation

is about to pluck down ruin on their reputation. They can only purchase escape by Fœticide. Then come agonizing appeals and large bribes to the physician. The young physician, who has as yet but a scanty support, with loose notions, it may be, of the moral aspects of the deed to which he is urged; withal somewhat stultified in his reasonings by sophistries of medical ethics and nice legal and physiological distinctions; touched, too, by pity for the distressed applicants—is under strong temptation to lend himself to a most unworthy use of his knowledge.

We beg leave to submit, in all kindness, a few thoughts designed to quicken the moral sense of the physician, and encourage him, in such cases, to a course worthy the dignity and the solemn responsibility of his profession:

1. Fœticide is a violation of the laws of Nature, which are the laws of God. It is a daring interference with the arrangements of the Creator;—an invasion of His prerogative;—the reaching of a rebellious and destructive hand to the very fountain of Life, to overthrow the ordinations of the Father of all. The truth of this needs not to be argued. The monstrous sin which it involves can scarcely be made more odious than in the bare statement of it. We take it, that it is no part of a physician's business to pervert and overthrow the laws of God.

2. The *end* sought, in fœticide, is not such as can ever palliate, much less can it justify, the proceeding.

It is not arresting the operation of one law to assist the free operation of another, whose workings have been impaired by disease or misfortune. It is not the destruction of an embryonic or fœtal existence to save a mother's life—where the former must certainly perish if the latter is not saved. No: it is to screen one crime by committing another; to shield criminals by the sacrifice of that which is sinless; to save transgressors from the just consequences of their wickedness; and to add to the sins of sensuality the deeper sin of unnatural and murderous destruction of life. Or, it is to aid those who, in married life, ought to glory in fulfilling their mission as parents.

to crush out the tenderest and holiest instincts of their nature, and sacrifice them to a groveling and shameful love of ease, or ignoble desire to avoid suffering and care: thus reducing them to a degradation in which the beasts of the field would disdain to hold fellowship with them. In its least repulsive form, therefore, it is destructive of the noblest refinements of our nature; and in its worst forms, destructive of all virtue. There is nothing left to respect in man or woman, who can purchase carnal indulgence by the deliberate sacrifice of life. God has thrown peculiar sanctities around the shrine of inchoate existence—so as to warn all who are not willing to assume parental responsibilities against an unholy approach. But if these can be laid waste, by professional skill, so as to invite vice, and insure against its results, there is no fathoming the depths of depravity into which sin-enslaved natures will descend.

3. It is *murder*.

It is not worth while to attempt to embarrass the question with nice physiological distinctions between embryonic and foetal existence. This is, after all, only a chronological question as to the date of the murder. Would you deny destroying a man's harvest, if you destroyed the germs in the seed sown in his field? Would you evade the responsibility of interfering with freedom of speech, by the plea that you hindered no word from being uttered, but only cut the man's tongue out? Would you escape the responsibility of drying up a stream, by saying that you merely stopped up the fountain? No, no: away with these guilty subterfuges. All of the life that is to be, is there: and on you rests the responsibility of taking away life, by a most daring intrusion into the recesses of being, and profane entrance within the veil, amidst the awful and holy mysteries of incipient existence.

Need we add to all these considerations, the vengeance—the certain and terrible vengeance which the God of Nature will take on transgressors? We speak not of spiritual penalties here—but the fearful results of these violent wrenchings of Nature, which must come—the broken constitutions, the suffering; the peril of life, the haggard

existence, and the premature death of those who are at once the authors and the victims of sin?

We appeal to Physicians—in whose hands the responsibility largely rests—to put down this spreading crime; to dry up this fountain of vice; to conserve private and public morals by a firm, manly, and honorable course, such as the dignity of their profession demands—such as the best interests of society require.

THE UPS AND DOWNS OF A DOCTOR'S LIFE.

BY R. LUDLAM, M. D.*

The life of man is made up of vicissitudes. His history is one of detailed contingencies, of ups and downs, of mutabilities in fortune, fame and friendship. While his lot is viewed as a common inheritance, his experience is that of nations, classes and individuals.

It would indeed be strange if the physician alone should prove an exception to this rule. The doctor, too, has his share of variety, of incident, of prosperity, and of adversity. I propose to direct your attention to a few points which may influence your future experience, as they have done that of your professional predecessors. I shall speak plainly of those small matters, which from their being frequently overlooked, are really the more important.

The function of the physician is to do good to others. If this duty is rightly performed, it will not fail to open a deep and perennial well-spring of happiness to his own mind. In the old Greek story, Achilles, when disguised as a woman, was discovered by what he selected from the pedler's pack. The physician's experiences will vary with the course he elects to pursue towards those among whom his lot is cast.

However various the schools of medical belief, there are really but two classes of physicians—those who *work*, and those who *shirk*, or those who think in person, and those who think by proxy. A friend suggests a third class—those who never think at all! Now, as honest, manly toil sweetens the bread of the laborer, so the straightforward, educated energy of the good physician brings the glow of contentment and the bright gold of a clear conscience. As the common idler, by his neglect of duty, entails misfortune upon himself and upon others, so is it with the professional idler. He is an adulteration, an alloy, a counter-

* From the closing lecture delivered in the Hahnemann Medical College.

felt. As there are pinchbeck patriots in our day, so there are and always have been physicians who do not give out the ring of the true metal. They are slow to volunteer, dodge the draft, shrink from assuming responsibilities, have no purse or principle, part or lot in the issue, unless it be to croak and to hold fat contracts. The patriot may turn politician, the physician become an unscrupulous speculator upon the misfortunes of his fellow-men.

To-morrow will be Commencement day. Some among you are to graduate, to receive your diplomas; the authority to go forth to the world as accredited physicians. The knowledge which you have acquired as students will soon be brought into requisition. The genius you possess for the active duties of your profession is as yet undeveloped. The twin-sisters Talent and Tact are to make or mar your fame and fortune, to shape your experience as medical men. The ups and downs of your life will depend upon the manner in which you use these two principal elements of success. The obstacles to be encountered in "getting into practice" will soon have to be met. Your claims to the public confidence will be in proportion to your improvement of the advantages which you have enjoyed in this Institution and elsewhere. If the talent with which you are entrusted is placed at a good interest, your reward will be certain to follow. There is much of comfort for you in the homely old maxim: "The Lord helps those who help themselves." If you are qualified, earnest, prudent and patient, your success is certain.

Let me counsel you, therefore, to be social and manly; in plain Saxon, to mind your own business, and to occupy your intervals of leisure in storing your minds with useful information. Every hour's study is qualifying you for the high and responsible duties which are yet to devolve upon you. Self-culture is self-perpetuating. Each day's labor will bring its own reward. By and by you will revert to those early endeavors as bright spots in your professional career. Never fear but your zeal will be appreciated. There is a species of Free Masonry among the really intelligent whereby you will be recognised and your resources made available to the sick and needy. Your worth will certainly make itself manifest. The germ is within you, and it is left for you to supply the conditions of its development.

Many of the annoyances and perplexities of the young doctor spring from impatience. He desires a large practice at once, and will not be content with a gradual increase of his popularity and usefulness. The golden stream must be quick and violent. *Pray do not be precipitate in this*

matter. A hot-house reputation of this sort is neither enduring nor desirable. Were the forms of beauty which are carved along the wild forest and up and down the aisles of earth the work of a day? Can you hasten the process of crystallization?

* * * * * Every physician must take a course of object-lessons in human nature. He should be philosophical enough to accord with community, especially the two classes thereof in which he is more immediately interested—his patients and his professional brethren. With the former his face soon becomes familiar, and may as soon be forgotten. In adversity he will be regarded as a friend, in prosperity he may seem to be overlooked; in storm an anchor, in sunshine superfluous. Many call upon him as they do upon Providence—when in trouble, which being removed, is deemed sufficient cause for his dismissal from service, and perhaps from memory also.

The ingratitude of those who have reaped of your benefactions; the feeling which implies that it is not "for value received" when your bill is presented, will sometimes afford you no slight measure of annoyance. But the sources of pain and pleasure lie very near to each other in this life. Our professional nerves, like those of our physical bodies, may convey the most pleasant or the most painful sensations. They may become so morbidly sensitive and irritable as to occasion much of suffering; may be benumbed, blunted and paralyzed, or, by careful training, we may develop in them a sense of grateful and appreciative perceptions.

"Plant blessings, and blessings will grow;
Plant hate, and hate will grow;
You can sow to-day—to-morrow shall bring
The blossom that proves what sort of thing
Is the seed, the seed that you sow."

Let us in imagination visit a few patients. Permit me to remain invisible. It is a beautiful day, and we ride for pleasure—the pleasure of doing good. The first call made—we must see those most ill early in the morning—is upon a little boy of three years who has diphtheria. We find the patient where we left him late last evening, *id est*, in his mother's arms. She has waited and longed for your arrival, fearing that a change in his symptoms betokens a fatal result. A glance arouses suspicions that she is correct, and these are confirmed by a careful examination. The fond mother would know the worst, and in as tender tones as you can command, she is told that her last-born must die. The effect upon her and upon the family—for the reflex of sympathies is through the mother always, is consoling and encouraging, or painful to the family, or calamitous to the patient. If

your advice has been sought because of a well-grounded confidence in professional skill; if the choice of the physician has not been made in extremity, or because he lived just around the corner, and was therefore most convenient; if the family is educated and well organized; everything will go on quietly, and every effort be made to afford the patient the best possible chance for recovery. Otherwise distraction and disorder, while they seal the doom of the patient by subtracting from your undivided interest in the case, will sow the seeds of bitter reflections, and unkind, because unnecessary regrets. Here, however, the patience of the parent is your stay and encouragement. You are stimulated to noblest endeavor, and will at least have the satisfaction which springs from appreciation, the reflection that parent and physician have done their duty. "From a good home it is not far to heaven." Before you come again, that little patient may have made the passage, but he will not have left the one or crossed the threshold of the other in a tempest!

The doctor's feelings on leaving such a scene will vary with the conviction that, while he has acted uprightly in every respect, those most interested in the little sufferer have not withheld their fullest confidence and support.

The next patient we visit has been an invalid for some weeks. We enter the parlor, *en transitu*, the sick chamber. Everything wears an air of neatness and refinement. Only a thin window-pane separates winter from summer, for, although it is frosty without, there are flowers within. Here, at least, is one who does not think it all of one's duty in life to cultivate the practical and not the poetical, hops and not hyacinths.

The patient is delicate in person, and of cultivated taste; has a greater admiration for depth of character than for dispatch, and would certainly be disgusted with any display of professional pyrotechnics. That politeness which old Dr. Johnson styled "benevolence in trifles" is most current in this atmosphere, as indeed it should be everywhere. A few queries disclose a temporary discouragement. There are clouds in the horizon of her hopes for recovery. She has been weeping, or, technically speaking, trying the effect of counter-irrigation! You have the disposition and ability to dispel those clouds. If the sunshine came in at the door when you entered, the vapors will soon be dissipated. You may take a hint from that sunshine, which is ever calm and strong, and pure and joyous. The prescription is made in due season—"business before pleasure"—a little conversation, not

gossip, is had, and we are again on the wing.

What a self-registering thermometer is the doctor. His ups and downs are literally influenced by every change of atmosphere and surroundings. His scale, which is that of Celsius, and not of Celsius, is graduated upon his physiognomy, and not upon porcelain.

Let us skip a few names on the list, for it is vulgar to parade one's professional popularity, and look in upon our bachelor friend. This is his elysium. The old fellow's world is a hemisphere, and chaos is come again. Pain may have been the first successful surgeon in healing wounds and fractures among savages, but our patient is satisfied it will never cure the rheumatism. He is more cross than complimentary, and growls because of the lateness of your visit. Why leave him to die of neglect? No one ever suffered like himself, and none were so unfortunate. Really, if you do not attend upon him a little more closely, he will feel himself compelled to try some quack nostrum, or somebody's else physician. Mr. So-and-So was cured of this disease in ten days, and it seems more than strange, it is needless, that he of all others should be victimized. His answers are as crisp as his toast, and he would prefer medicines as strong as his tea. You must look to your laurels, or yours will be the vision of Jonah *en route* for the dry land! He is extremely irritable, and, by reason of infirmity, not independent—a type of men everywhere, and you do not feel improved by your visit. You select the remedies, and petition heaven for a prescription for patience and forbearance suited to both parties.

I have a word concerning this class of patients. It is the most pleasant, as well as the most politic, always to be in good humor toward them. Nothing is more absurd and suicidal than for the physician to permit himself to be vexed at trifles. Remember that those of your patients who really suffer have the worst of it. You may as well be kind and obliging. What would you think of a conductor upon one of our street railways who persisted in running his car in such a manner as always to discommode the passengers? Above all, if such crusty old fossils infect your spirits, give them a thorough ventilation, as you would your clothing if they had the small-pox, before visiting the next patient, and do not inoculate a third party with the bad humor. Beside the eruptive fevers, there are other affections which are contagious, the nidus of which is sometimes conveyed by the doctor from house to house.

In a small tenement on the next street is another representative patient. Here every thing betokens poverty and want. A po

soldier's widow is ill, and you have come to her relief. She is cheerful in her affliction and salutes you with the grateful assurance that your last remedies were well chosen. You find her convalescent, and feel yourself in a different atmosphere from that which you have just left. Her husband, a true man and a patriot, has gone to his reward. The double motive to take care of the poor, and to help those who have sacrificed so much for our common weal, is presented in her case. The medicine is not all you will leave her, nor is money the great desideratum. A loyal word, a gleam of hope to lighten her cares, and lift the clouds from her little horizon, must be elements in your prescription. When you take the hand of her little one you have taken hold upon her heart. Children are apt interpreters of character, and it is a bad sign for them to hold you in fear. Beside, a few words of the right kind in their ears is good seed sown upon good ground that may bear fruit when the physician and his grateful patient in this little family have passed away. You may save ink and paper, credits and collections on such visits. There is a pay-as-you-go feeling which discharges the debt when the door has closed upon you.

Be kind to the poor. Remember the saying of Boerhaave—"God is their paymaster." No legislative enactment, no selfish and intolerant exclusion from field or hospital duty can deprive you of the prerogative of serving your God and your country. You need not wait for surgical sanction, or shoulder-straps, but lift the burdens of the sick and the sorrowing in the ranks of civil life, and the blessing of the widow and the fatherless to the remotest generation shall be yours. "They also serve who only stand and wait."

One more call, and our round of visits is made. We enter a neat little cottage whose very look is natty and Quaker-like. This home has its attractions in those who inhabit it; its pictures are living, breathing personifications of domestic happiness; its furniture is not fashionable, its pretensions are few and not striking. The mutabilities of life have crept into this usually quiet household. Yesterday it was in peril, to-day it is a paradise; the pictures looked anxiously, but now they are more than pleased; the whole house was disturbed, now it has assumed its primitive order. When the drapery of night fell about this cottage there came a little stranger to claim a place in the hearts and affections of the household. Look upon that boy, and realize with Richter, "The smallest are nearest God, as the smallest planets are nearest to the sun." Who shall say what elements of happiness are wrapped in that blanket,

or what traits of character are bound up in that boy?

But now we are at home again, and you are prepared to appreciate the influence of the physician's daily experience upon his life's record. No one is more familiar with marked vicissitudes. He deals in antitheses. His own feelings act and react upon those of his patients. He meets with every species of reception and of recognition, and is happy or miserable in proportion to the spirit and determination with which he enters upon and discharges his most important mission. He is to community what the margin of cilia is to the oyster, which, by maintaining little currents of water, serves to keep the creature in health. Other organs may appropriate more of the pabulum, but he lies nearest the confines of the social microcosm, is more delicate and sensitive, and could by no means be spared in his place. "Why should he not make his labors of life redolent of truth, and simplicity, and kindness?"

The relations of medical men to each other influence their ideas and experience greatly. It is considered a family failing that doctors shall disagree. If this were done quietly, and without a species of inquisition into conscience, all might be well. But it is not so. Bigots abound among us. The schools are intolerant, and there is little doubt but real progress has long been delayed by a waste of time upon polemics. The question at issue is one of boundary lines, and not of the fertility of fields which are to be enclosed. This is all wrong. There is too great a disregard of the philosophy set forth in the Spanish proverb—"Seek not to set every man's sun-dial by thine own watch." We are prone to forget that principle and prejudice are incompatible, and that an infraction of the ninth commandment must still be regarded as a violation of the decalogue. * * *

You will sometimes be annoyed by the persecutions of those who differ from you in medical sentiment. One will treat you in the spirit of a certain Duke of Somerset, who deigned to pity Adam because he had no ancestors! Another will attempt to drown you with the muddy torrent of invective. A third, *à la* blacksmith, will exercise "a little brief authority" in discrediting your professional certificates, and mayhap send you an ungentlemanly message in the bargain. In many ways you may find that your brethren are given to ignore the requirements of good breeding, and of that good taste which "wounds no feelings, infringes on no decorums, and respects all scruples."

The best course of procedure is the plainest, if not the most easy one. Tolerance is in great part a thing of tempera-

ment, but it is also a fruit, as well as the index of a thorough education. The outward touch does not soil the sunbeam. "The snail, to be rid of annoyances, bartered its eyes for horns." The fire-fly may flourish his insignificant lantern, but it needs the darkness to make it visible, and he will never set the world on fire.

"Not a truth to art or to science been given
But brows have ached for it, and souls tolled and
striven:
And many have striven, and many have failed,
And many died, *slain by the truth they assailed.*"

Depend upon it, gentlemen, the people, the laity, these most interested in our labors, care precious little for our professional squabbles. It makes little difference to the patient whether the surgeon about to amputate his limb holds the catlin in the left or right hand, so that the operation is safely and properly performed. It is well enough, indeed there must in the nature of things be differences of opinion and various schools of belief, among medical men. "A land-mark is well placed between two brothers' fields." But that land-mark is, or should be, set up as a means of peace and not of warfare, to save trouble, and not to make it.

Because I am an ingrain Presbyterian, does it follow that I am licensed to deny the benefit of clergy to my neighbor who differs from me in his religious tenets? Would community estimate the depth of my character and the purity of my life by my zeal in propagandism? Is the religious journal, the organ of a particular society, most esteemed for its polemical articles, or because of its richness and depth of learning, its varied research, and the cropping out of a fervent piety that adorns each page? You are organs of a particular belief in Medicine. You are grounded in the faith, and your works must follow you. The true patriot discards party issues to save his country when it is endangered. His most efficient weapons against disease are not found in the paltry politics of his craft, but in resources which have been gathered from all quarters, in the fruits of his own and of others' labors.

Every ship should have its flag-staff, but the colors are not the compass. Truth should sit at the helm, and truth is impersonal. Popular sentiment is a fickle breeze that, but for the guidance of truth, may drift us ashore. The flag is an emblem of nationality. There are nationalities in science. When the foreigner changes his residence, he is not absolved from those mutual responsibilities which every mortal inherits. So when men of science shift position in the realm of letters, their new papers of naturalization do not afford a warrant for out-lawry on either hand. The inborn gentle-

man is a gentleman everywhere and always. The refined and educated German, the gay and frivolous Frenchman, the slow-paced Englishman, have no need to specify their nativity upon their door-plates. So, in the practice of an honorable profession, you need not flaunt your banner as a gift of birthright or of adoption, but take rank as men of culture and of refined sensibility in the realm of science, able to make due allowance for differences of opinions, and to appreciate real sincerity and worth wherever you may find it. It is no compromise of one's faith to be charitable; no crime against one's nativity to be cosmopolitan.

But, being at peace, you owe other duties to the medical profession. You are to contribute your mite towards the general advancement. It is a law of our mental and moral natures that we grow as we give, and are happy in proportion as we make others so. He who identifies himself with the literature of his profession is a producer, and the reflex of his labors will be felt in his own enjoyment and experience, as well as in that of others. I had rather define the sphere and mode of action of a new and valuable remedy, analyze a diseased state so that it may always be recognized and understood, solve some physiological problem hitherto inexplicable, than be the author of the most popular history or poem ever written. It is impossible to estimate the influence you may exert in this direction. None of us are independent. As well might the several organs in our bodies declare themselves free of sympathy in labor and feeling with one another, as for you to claim exemption from duties of this nature which devolve upon all. Think what a degree of benevolence may be attained by this means. As the light of other and remote days, through a species of crystalization in the coal we burn, is brought to warm and cheer our homes, so the rays you may shed upon the path of your fellow may be transmitted to the latest generation, an influence at once beneficent and beautiful.

Consider what a kind Providence has done for man, and resolve that you also will accomplish something for his welfare. "For him the earth teems with fruit and flower, with the rich harvest and golden grain. For him the fresh fountains leap from the solid rock, and the cattle feed on a thousand hills. To lull him to repose the solid earth turns away from the too brilliant sun, and the gentle stars light the nocturnal sky. To wake him to vigor, the morning dawns, and the light of day, tempered by a provision of admirable efficiency, swells gently into brighter effulgence, until the full-orbed sun bursts in splendor upon the world."

The compensating relations of Nature are truly wonderful. He is a Christian phi-

losopher who leaves her to adjust the reward of devotion to the welfare and prosperity of the race. What more could be desired? What better evidence of duty well done than the testimony of an approving conscience? What more grateful memory as an incense to God than a life of well-spent endeavor?

For the Am. Homœopathic Observer.

HAHNEMANN.

The one hundred and ninth anniversary of Hahnemann's birthday is now close at hand, and, to many, a few particulars concerning this great genius cannot but prove interesting. Samuel C. F. Hahnemann, founder of the Homœopathic system of medicine, was born on the 10th day of April of the year 1755,—a German by birth, inheriting a disposition for which that nation is distinguished. At a very early age he evinced decided marks of intelligence and performed wonderful feats of industry, which gained for him free admission into the high school at Meissen—the place in which he was born. The science of medicine now gained his attention, and while pursuing his studies at the University of Leipsic, he procured a livelihood by translating books, (for he, too, like many men, was obliged to struggle with poverty,) and giving lessons in the various languages. His desire for knowledge was so great that he accustomed himself to sleep only every other night. This course of study he persevered in for several years, and in 1779 he took his degree of M. D. A few years afterwards he married, and soon made for himself a reputation in Dresden, where he settled. It was here he got disgusted with the then prevailing mode of cure while translating a certain article on the properties and effects of Peruvian bark on the system. He noted the mass of contradictory effects ascribed to it; became zealous to find out for himself what its real properties were, and he now tried it in very powerful doses upon himself, and on his discoveries he (as all homœopaths know,) based the law of "*similia similibus*." His experiments on peruvian bark alone would not satisfy him; he tried other drugs, and with a like effect. His new discovery was a

science which every additional experiment proved to be true—and one of the laws of nature. The world at first received these great facts with ridicule; and for many years he struggled ceaselessly with his opponents, until at last his wonderful cures and persistent perseverance gained for him a name, which it was destined should never be lost. It was now his lot to marry again; this time a young Frenchwoman. He settled in Paris; and here he was attended with the greatest success, which lasted until death took him away in the year 1843. He leaves behind him many works and a name as imperishable as the science which he be-
gat. C. R.

London, C. W.

DIPHTHERIA.

BY J. E. BROWN, M. D.

The disease assumes two forms: 1st. Commences with swelling of the tonsils, pain extending to the ears; stiffness of the jaws; high fever. After the disease advances a few hours, a thin membrane is seen covering the whole throat, a thick ropy mucus from the mouth or nose. Great prostration accompanies the disease from the commencement. Sometimes the tonsils swell so large as to nearly cause suffocation, breathing rattling, fœtor of breath.

I give for this form Merc. Iod. 1st decimal trit. and Kali Bic. 1st decimal in alternation every half hour. I have lost none. I pay no attention to the fever as soon as the membrane is seen.

The other form commences with a very little swelling, a good deal of fever, and pain in the limbs, back and head. On examination, a few small, white spots are seen on the tonsils. These continue to spread and become confluent, till the whole throat is covered. I have seen cases where the throat was nearly filled on account of the thickness of the membrane. I have had cases where the membrane has extended down the throat at least 2½ inches. I removed a membrane of that length, a short time ago, from the throat of a girl twelve years old.

In this form I use Caustic Ammonia, 1st,

decimal, fifteen drops in a tumbler two-thirds full of water, a teaspoonful for a child, a tablespoonful for an adult, every half hour. Also, a gargle of 80 drops of the same dilution in a tumbler full of water—gargle every half hour, or, if a child, swab the throat.

I have not lost a case since using these medicines in the forms as laid down. In the latter form I give no medicine for fever, nor any other symptoms.

The fever generally leaves the second day. The throat feels a little more sore than the first day, and the membrane has generally extended somewhat more, but the third day the patient is better every way, and soon recovers.

I have had three cases where paralysis of the limb took place, and one was threatened with paralysis of the lungs. They all recovered. For the lungs I used Tart. Emet. 3d. For the limbs, Gelseminum 1st.

I have given you this treatment in a careless and disjointed manner. But I hope you will excuse me, as I have no time to give a full description.

DIPHTHERIA.—Dr. Thos. S. Scales says in this section (Woburn, Mass.,) we have seen excellent effects from Opium 1st, Gelsem. 1st, and Tart. Emet., in Diphtheria. We like Opium better than Bell., and Gelsem. than Acon. In many cases Tart. Emet. is nearly specific.

TREATMENT OF CEREBRO-SPINAL MENINGITIS.

(See American Homœopathic Observer, page 48.)

Dr. D. A. DAVIS reports: "I have lost three cases of *Cerebro-Spinal Meningitis*; saved two. Used hot applications to all. Two of them I did not see until they had lain 48 hours, and they soon died. The other that I lost was taken at 10½ P. M., and died next night at 12. I gave Aconite and Belladonna in drop doses, once in 15 minutes, without any change for the better, except to quiet them a little for the time. Many have been saved where they were taken in the lower extremities first, as is the case frequently."

T. BAKER, Esq., of St. Johns, Michigan, says that, "A disease, which our physician call 'spotted fever,' is prevailing here epidemically. A number of aged and young persons have died. It commences with a

sensation of dizziness, followed by a dull pain in the head; slight chills; rapid flashes of fever, with returning chills; severe pain in the back and neck; partial deafness, and in some cases severe sore throat follow. Under allopathic treatment the patient sinks into a comatose state, and death soon follows. In three cases the disease has readily yielded to Gelseminum in one drop doses, and Bryonia 5 drops in a tumbler of water, alternate half hour apart for twelve hours, then substituting *Belladonna* for the *Bryonia*. Hot flannels dry applied to the head and neck."

Dr. V. W. SUNDERLIN writes: "I am now treating the fourth case of *Cerebro-Spinal Meningitis*, and have not lost any yet. I will try and report my experience at some future time."

We hope that Dr. Sunderlin will find time to send a detailed report of his treatment for our next number; and we shall be pleased to hear from any other physicians who have treated this disease.

INFLAMMATORY RHEUMATISM.

Dr. J. E. BROWN writes: "I would like to see a piece in the OBSERVER on Inflammatory Rheumatism, and especially on that disease following diphtheria. I have had a few cases. They were very severe, and continued a long time. Two cases were under treatment nine weeks. They recovered, and are as well as before the attack.

"I do not like to have cases continue so long, and if any other homœopathic physician can cure them quicker, I want his treatment.

"I hope that all the subscribers to your paper will try their best to make reports often of different cases, and give symptoms clearly, and mention the dilution or trituration. Whenever I have anything I think interesting, I will be happy to report. I am very much pleased with the OBSERVER, and I will try and do my share to sustain it."

ROBINIA PSEUDACACIA.

BY W. H. BURT, M. D.

I beg leave to introduce to the profession a new and *very valuable* remedy for sick headache and dyspepsia.

I was called to see a horse that was poisoned by eating the bark of this tree,

while being tied to it. The symptoms produced in the horse were, constant stepping about; refuses all kind of food, but wants to drink all the time. The water he takes immediately passes out of the nostrils. I gave him *nux* and *merc.*, and in two days he was well.

This occurrence excited my curiosity, and I determined to make a proving of the drug. I have made three provings on myself, and have experimented with it upon two dogs, who died under its use. I will make another proving on myself, and then publish the result. Before I complete it, I would like some of our physicians to prove it, and also test it in practice. I will give the pathogenetic symptoms, so far as developed, for the purpose of drawing out the observations of others.

Constant, dull, heavy, frontal headache, very much aggravated by motion and reading. Dull headache, with sharp stitches in the temple; dull, throbbing frontal headache; severe neuralgic pain in the left temple that prevented sleeping from midnight until daylight. White coating on the tongue, with a red tip. Nausea all the afternoon by spells; nausea for three hours, followed by profuse vomiting of an intensely sour fluid; vomited three different times; the fluid vomited is so sour that the teeth are set on edge. Constant eructations of a very sour fluid. Eructations constant; dull, heavy, aching distress in the stomach; very severe, sharp pains in the stomach all day and night; constant distress in the epigastric region, with cutting pains in the stomach and bowels, and a good deal of rumbling; burning distress in the stomach and region of the gall bladder. Feeling very faint and weary; no ambition; very low spirited; bowels generally constipated. These symptoms were produced by chewing the green bark, commencing with 10 grains, and increasing the dose until I took 50 grains.

Clinical Remarks. Miss L—, aged 26; temperament is nervous bilious, with a little of the lymphatic. Menstruates every three weeks profusely. Complains of a constant, dull, heavy, squeezing pain in the stomach after every meal. The distress is so great

that she cries every day with it. Stomach is generally sour; bowels very costive; great deal of pain in the lumbar region; obliged to keep her bed most of the day. Hands and feet are very cold. Cannot eat over a single meal a day, it puts her in such agony. I tried faithfully *Nux.*, *Puls.*, *Acon.*, *Sulph.*, *Ars.*, *Ferrum*, *Hydrastrine*, *Macrotine* and *Caulophylline*, without the least benefit. I then gave her *Robinia*, four drops at a dose, three times a day. In four days she was perfectly free from pain. It is now three months, and she is still free from the distress, and can eat all kinds of food. This is the longest period she has been free from pain in her stomach for three years. Two allopathic, one eclectic, and one homœopathic physician tried faithfully to cure her, and all failed. I regard it as one of the best cures I ever made. I have given it a great number of times for sour stomach with good results. I have never had such good satisfaction from any other remedy in acidity of the stomach.

In gastric headache from a sour stomach, caused by fat meat, gravies, flatulent food, cabbage, turnips, warm bread, pastry, ice cream, raw fruit, &c., I would like our physicians to try this remedy. I can assure them they will not regret it. I have cured two cases of chronic sick headache with it. It has been four months since, and they remain perfectly well. I would like to report these cases, but my space is too limited. It is worthy of remark that *Robinia* acts the best where the patients are *irritable*.

TRANSLATED ARTICLES.

Notes from Practice, by FLORIAN SIMSCH, Homœopathic Physician at Schœnberg.—From Western Hom. Observer.

EXTERNAL USE OF APIS MELLIFICA.

(Continued from page 82.)

There was dryness in the throat, feeling of soreness under the upper part of the sternum, respiration fatiguing and quick. When a violent attack of coughing comes on he becomes blue in the face, and is swollen. Percussion reveals only a weak sound on the upper part of the left chest, under the clavicle, and auscultation detects slight bronchial respiration during inspiration and coughing. There is also pain with stiffness of the neck, extending to a point between the shoulders. In other respects there is

nothing particularly worthy of note, excepting a herpes circinnatus on the interior part of the right hand joint. As the patient was discouraged with all medicinal treatment, I proposed the application of the Lebenswecker, to which he assented. He was Baunscheidted on the neck and between the scapulæ, also on the fore part of the throat, and in the intercostal spaces, parts being rubbed well with Apis oil. The usual appearances presented, viz: redness, swelling, itching, and burning of the punctures; but during the night the cough increased and was accompanied with insomnia. From the second day, however, improvement commenced.

After ten days the operation was repeated, and again the first night after there was increased cough and sleeplessness, which was again followed by continued improvement. After the third application the cough disappeared, and the herpes on the hand, which had also been Baunscheidted, had also vanished.

Case IV. E. L., in Schœnberg, was vaccinated in her fifth year, and at the same time experienced a severe fall. Soon afterward her ankle joint became inflamed, which the father attributed to the vaccination; though the mother believed it to be occasioned by the fall. The inflammation increased, and suppuration, through injudicious treatment, resulted in an abscess which opened in several places, and from which several pieces of bone were discharged. After using plaster, salves and baths for nearly two years, cicatrization took place, leaving, however, deep scars. In her eighth year she suffered from continued chills for three months, and remained unhealthy for half a year after.

From the fifteenth year, from the commencement of the menstrual period, which was regular, she remained healthy until the present month, on the twentieth of which, being the whole day poorly clothed, and exposed to all the vicissitudes of weather, she contracted a rheumatic fever, accompanied by bilious symptoms. When the latter were allayed, the rheumatism continued—the right side of the body being mostly affected.

No joint was excepted, and frequently several were attacked. She was sent to the hospital, where her disease became chronic under Allopathic treatment. She finally became partly paralysed; the glands of the throat commenced swelling and suppurated in three different places. Her menses ceased, and the patient became emaciated as a skeleton. By the use of camphor mixtures, powders and vesicants, suppuration continued to such an extent that many of the muscles of the neck were involved. When, after many months, there was no im-

provement, the patient was left without medicine for eight weeks.

I saw this unfortunate person several times—and, having requested, received permission to use the Lebenswecker with the application of *Apis oil*.

Status præsens.—The patient is lying like a skeleton on her back, her hair cut short on account of the vermin which constant washing could not destroy. There are three ulcers on the neck, with callous borders, discharging ichorous matter, several cervical glands the size of a walnut and as hard as stone, can be perceived; thirst normal; appetite good; the right arm at the elbow joint is much swollen and semi-flexed, it being impossible to straighten it on account of the shortening of the tendons. The wrists and meta-carpal joints of both hands are rigid. The fingers of the right hand are closed, extension being impossible, while the fingers of the left can be straightened by a second person, but contract immediately. The upper extremities are quite powerless, the patient cannot grasp anything, and has to be fed; both palms are turned more to the inside, and are quite cold. The lower extremities, particularly of the right side, are extremely emaciated, and cannot be moved at all, being very cold and dirty; blue spots are observed on several parts. The knee, foot and large toe joints are swollen from the former vesicants, and are painful to the touch, or when being moved. Sitting is impossible, on account of severe pain in the back; upon rubbing with both thumbs down the spine, the greatest sensitiveness is in the region of the hip, on the third to fourth lumbar vertebræ. There is great constipation, the bowels being moved once in eight to ten days; the passage of urine is very tardy, and, in spite of all effort, lasts from ten to fifteen minutes—the urine, however, being normal in color. The skin is dry over the whole body, and is dirty and withered. The pulse 60. with rheumatic palsy of the extremities, and exudation in the joints.

The use of the Lebenswecker was commenced on the 13th of August, by operating on the whole back, especially near the hips, the upper and lower extremities; all the joints were then rubbed thoroughly with *Apis oil*. This was done once in ten days, and so continued until the end of November.

After the second application, an improvement was noticed; the ulcers on the neck healed in four weeks, and the swollen glands disappeared at the same time; sensitiveness, and the power of moving returned without pain in hands and feet.

This poor unfortunate being finally recovered and became possessed of quite a healthy appearance. She not only was able to move, but could remain out of bed. In

he month of October she could walk on crutches, and became more fleshy, and improved so decidedly that her muscles became strong, and the arms and the hips became quite round. Although the upper part of her body had so much improved, the lower extremities, from the knee down, especially the right foot, were still weak and somewhat emaciated. With her general improvement, her menses returned and became profuse, although they appeared every two weeks, and continued from six to eight days.

The cure was postponed until the end of November, partly on account of the latter circumstance, partly because my time was taken up with other business.

Without any further medical attendance the menstruation became normal through the winter months, and no relapse of rheumatism occurred. The patient retained her healthy appearance, and the functions of the body were normal. She practiced daily with her crutches in the room, and embroidered industriously, although her thumb and the first finger of the right hand are yet weak, the needle having to be held with the middle part of the finger, which is rather a difficult performance. She is very happy to be relieved from her helpless position, and to have the upper part of her body in a healthy condition.

In the month of May I commenced again with the Lebenswecker at intervals of twelve days, and the patient is at present entirely healthy, fresh looking, and fat in every sense of the word.

All her functions are normal, and she sews and embroiders industriously. She has, of course, to lead a sedentary life, but there is no pain or swelling of the joints—in one word, from the head to the knee, she is quite well. The lower extremities are thin; the right more so than the left. In the daytime her limbs feel more cold, in bed, however, they become warm easily, and she can move her feet as she pleases; when, however, the right leg is lifted, for example, to walk, the foot hangs powerless, and is not able to support the body. I intend to further continue for several months the applications to ascertain if *Apis* is able to cure this case completely, or if it will be necessary to use other Homœopathic remedies; but so far I believe that I have a right to assert that *Apis* has effected wonders by its external application.

(To be continued.)

For the Homœopathic Observer.

THE REVIEW vs. DR. HALE.

In a late number of the OBSERVER, Dr. Hale, in alluding to New Remedies, adverted to Dr. Hering and his apparent exclu-

siveness. In the March number of the *Review*, an anonymous writer says, that if "Dr. Hale would go to Philadelphia, Dr. Hering would open his iron safe, where, secure from fire, he has arranged the manuscript of confirmed provings of more remedies than the Professor (Dr. Hale) has thought to put upon his list. Here he would probably find the most extensive provings of *Gelseminum*, and many of the 'new-fangled' remedies that would aid him in his new *Materia Medica*."

We happen to know that when engaged upon his monograph on *Gelseminum*, Dr. Hale earnestly solicited from Dr. Hering any provings and clinical notes which might be in his possession. He also has solicited his aid in getting together the provings of New Remedies, but up to this date Dr. Hering has not made any answer. Probably during the next hundred years the provings alluded to may appear in the pages of some German journal, to be translated and published in this country sometime during the 20th century.

Such exclusiveness does not suit the American mind. It is too practical and progressive. *

PODOPHYLLUM IN CAMP DIARRHEA AND CHRONIC DIARRHEA.—Dr. V. W. Sunderlin says that in Alabama, during the summer of 1862, he found *Podophyllum* very efficacious in treating the diarrhea which prevailed in camp, and since then has used it considerably with excellent success in diarrhea of a chronic character.

[We shall be pleased to receive from Dr. W. S. Cornelius, for publication, a report of a remarkable cure of Chronic Diarrhea, referred to by him in conversation some time since.]

PERTUSSIS.—Dr. E. Burdick says: "There is one remedy which I have used with entire success in hundreds of cases, either cutting the disease suddenly short or ameliorating the severity of the attack—namely, *Chelidonium majus*. I have had, in a few cases, to resort to cuprum after the chelidon. If there is any better remedy, let us have it through the columns of the OBSERVER."

We would direct the attention of Dr. Burdick to *Mephitis putorius*, and *Corallium rubrum*, and hope that our physicians will report their experience in the treatment of this form of cough.

A M E R I C A N

Homœopathic Observer.

"Similia, Similibus, Curantur."

"I present you with a Truth long sought for, a principle of eternal nature, I appeal to existing facts alone to convince you; and when a conscientious and complete course of study shall crown your researches with success, then, as I have done, bless Providence for the immense benefaction he has allowed to descend upon the earth through my humble agency, for I have been but a feeble instrument of the Omnipotence, before which we all bow in humility."

HAHNEMANN.

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DETROIT, MAY, 1864.

[No. 5.]

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EDITORIAL NOTICES.

Hahnemann Medical College. The annual summer course of lectures for the year 1864 commenced on the 12th day of April, and continues until the first of July. The course will comprise a series of lectures by members of the Faculty. The entire course is gratuitous to medical students and practitioners. Letters of inquiry may be addressed to A. E. Small, M. D., Dean, of the Faculty, or G. D. Beebe, M. D., Registrar.

Homœopathic Medical Association of Illinois. The tenth annual meeting will convene at the Hahnemann Medical College, 168 Clark street, Chicago, on Tuesday the 17th day of May next. A full attendance and pleasant occasion are anticipated.

The American Homœopathic Review for April contains obituary notices of Dr. C. von Boenninghausen, by Carroll Dunham,

M. D., Dr. C. von Boenninghausen, by Ad. Lippe, M. D.; Apis mellifica in Scarlatina Maligna, by Mr. J. H. Nankivell; A Case of Phlebitis, by H. Robinson, Jr., M. D.; A Reply to Dr. Bayes' Answer, by Ad. Lippe, M. D.; Lachnanthes tinctoria, Proving by Ad. Lippe, M. D.; Aloes, translated from Hering's "Amerikanische Arzneipruefungen," T. F. Allen, M. D.; Proceedings of Societies, Obituary notices of Dr. John A. Tarbell and Dr. Wm. K. Hallock.

Western Homœopathic College. The past session has been fraught with unusual success. The class numbered 68, and of the number, 22 graduated with honor. Among these were three intelligent and scholarly ladies,—the last of their sex most probably to be honored with a diploma from the College. Prof. Betterly, who gave his initial course on Materia Medica, acquitted himself with deserved praise. The Trustees and Faculty are on the eve of securing a new and more commodious location for the College. The erection of a new hospital by the city the present year will, it is confidently expected, afford enlarged facilities for clinical instruction the coming session.

To those of our friends who have applied to us for the Catalogue of the Western Homœopathic College, we beg leave to say that none has been issued yet.

(British) Homœopathic Observer. April 1864, contents.—Editorial encouragement. The question of dose by Dr. Bayes; Rheumatic fever, pericarditis, and pneumonia, by Dr. John Dummond; Notes on

Etiology of Cancer, by Dr. C. H. Blackley; **Review of Dr. Ryan on Homœopathic Infinitesimal doses and their analogues in nature**; **Medical Intelligence**, etc., etc.

British Journal of Homœopathy.

April 1864—contains the following articles: Dr. Langhein on the musk-symptoms of the pure *Materia Medica*; Dr. Mac Gilchrist on the state of the brain in sleep; *Animalcules* in diseased blood, by Dr. Roth; Cases of Neuralgia, by Dr. R. Hughes; The Homœopathic Treatment of Epilepsy, by Dr. Baerth; Homœopathic Infinitesimal Doses, by Dr. Ryan; Dancel and Bunting on Corpulence; Nunez on Tarantula-poison; Chapman on the Treatment of Diseases by Local Application of Cold and Heat; McLaughlin on Syphilis; Moore on the Homœopathic Treatment of Diseases of Dogs; Dr. C. Drysdale on Mercury; History of Homœopathy in America; Manganese in diseases of the stomach; Calc. carb. in Pressive Frontal Headache and Vertigo; Cure by Nitrate of Silver; Digitalis in Cardiac Disease; New Treatment of Gun-shot and Penetrating Wounds; Oil of Male-Fern for Tape-Worm; On *Trichina Spiralis*; Self-supporting Dispensary; Chronic Irritability of Fauces cured by Lachesis; Flesh-worm Disease in Germany; Lavelle's Remedy for Gout and Rheumatism; Treatment of Rheumatism with Sulphur; Cantharides in Vesicular Erysipelas; Reduction of Strangulated Hernia by India-rubber Bands; Papulo-versicular eruption caused by Morphia; Calabar Bean and its effects on the eye; Fissure of Anus cured by Dilatation; Death of Dr. Von Bönninghausen.

Western Homœopathic Observer.

April 1864, contents: Compound comminuted fracture of the Humerus, etc., by S. A. Merrell, M. D.; Vaccination, its failures, by H. W. Stennett, M. D.; A labor with prolapsus of the funis and transverse presentation treated by posture and manipulation, by Joseph Martin, M. D. Uræmic convulsions and diphtheria, by H.; The contrast—a case by E. Potter, M. D.; Editorials, etc., etc.

ON THE IMPORTANCE OF OUR INDIGENOUS REMEDIES.

BY E. M. HALE, M. D.,

Professor of *Materia Medica* in Hahnemann Medical College, Chicago, Ill.

The Homœopathic is the most splendid *Materia Medica* in existence. Before Hahnemann, all was either mere theory, crude conjecture, or imperfect empirical observation.

But Hahnemann, teaching that all knowledge of the action of drugs upon the sick, must come from our knowledge of their effects upon the healthy, built up a *Materia Medica* which alone would have conferred upon him an immortal name in the annals of medicine. His followers have, treading in his footsteps, still further extended our exact and scientific knowledge of the action of medicines, until none of the rival schools can show such a reliable collection of facts and observations as is embodied in our latest works in that department. It is true that they contain many imperfections, but when compared with the errors which abound in the writings of the dominant school, we feel gratified with our progress. They have improved in all but *Materia Medica*. It is our vocation to perfect that most important branch of medicine.

But we should not be content with the position we have gained. Until we can conquer "all the ill's flesh is heir to," we should strive to extend our knowledge of the qualities of remedial agents.

We are all aware that there are many diseases, many pathological conditions, and many abnormal symptoms, which we meet in practice, for which we have as yet no known specific—no proven remedy which is the *similium* of the diseased state.

It may be said by some over sanguine as to the resources of our present *Materia Medica*, that this is not a *real* want—that the remedy might therein be found if we would study more diligently, and master the material we now have. On the contrary, we have the testimony of some of our most distinguished masters of the art, that we have no medicine proven which will annihilate the cancerous dyscrasia; arrest the progress of Bright's disease; cure such organic lesions as softening of the brain, or hypertrophy of the heart, or break up the progress of a typhoid after the malady has once fixed itself in the system.

I have heard some of the oldest and most accomplished physicians in our school complain that there are certain symptoms of an annoying nature for which we have no proven remedy; or, if the symptoms were apparently found in our *Materia Medica*, the

drug failed to cure, because the *other* symptoms did not correspond.

It is the aim of this paper to point out the importance of appreciating and understanding the virtues of some of our indigenous remedies, and to stimulate that spirit of investigation into the properties of such agents, which some of the best minds of the profession now entertain. I shall also try to show wherein the Hahnemannian *Materia Medica* is deficient, and to point out those diseases for which we need more remedial agents to meet their various complications; and to make brief allusion to certain medicines, principally of an indigenous origin, which may prove of value—by aiding us in that “chief end and aim of all true physicians,” the *healing of the sick*.

It is an important doctrine of our school, that no physician *should use a medicine unless it has first been proven on the healthy*; in other words, that we must first have a pathogenesis before we can administer a drug.

While I admit, and shall teach, that we *should* have a thorough symptomatic and pathological proving of every remedial agent, I cannot go so far as to denounce the use of any agent when such use is based upon *veritable experience with it in disease*.

Hahnemann had no proving of *Verat Alb.* when he made his first splendid cures with that potent medicine. Okie used the *Hamelis* upon purely empirical data, and cured some obstinate conditions with it. Kitchen knew nothing of the pathogenetic effects of *Iris versicolor* when he treated diarrhoea and sick-headache so satisfactorily with that plant. Douglas knew but very little of *Gelsemium*, when he first found out its valuable action in fevers; and the *Baptisia* was utterly unknown to us, when some layman first ascertained its wonderful curative action in typhoids. We have no accurate pathogenesis of *Caulophyllum*, yet cure dysmenorrhoea with it every day!

But there are other, and I think logical, reasons why we are justified in using medicines when we have only their *uso in morbis* to guide us.

We all believe that there have been cures made by the dominant school; that the remedies which they have administered have removed symptoms and pathological conditions. We could not deny this, for our own observations would contradict us, and the reports found in their books, records made by honest and conscientious observers, would disapprove our denial.

The whole argument, then, can be reduced to the following logical formula:

1. *There is but one law of cure, SIMILI SIMILIBUS CURANTUR, and no cures can be effected except under that law.*

2. *Other schools of medicine have effected*

cures with unproven medicines, administered in large doses.

3. *Therefore, such cures were Homœopathic, i. e., made by virtue of our peculiar law of cure.*

Those who will not accept the correctness of this reasoning, are not true Homœopaths; for, by disputing it, they deny our fundamental doctrine. Homœopaths sometimes forget, that to deny the existence of cures made by physicians of other schools, is indirectly to deny the doctrine which our great founder enunciated.

This leads us to another consideration, and that is the subject of *dose*:

It is asserted by many of our school that the reduction in the size of the dose, followed necessarily upon the discovery of our law of cure. We admit this to a certain extent, but we do *not* admit, nor will any sane man, that no drug can cure until it is attenuated up to a certain point. If crude drugs cannot cure, then Hahnemann's pretended cures of colicodynia with 4 grain doses of *Veratrum Alb.*; of dysentery and vertigo with *Arnica*, in 6 and 8 grain doses, and syphilis with material doses of *Merc. Sol.*, are all fictitious. Indeed, our great master admits, all through his writings, that crude doses *do* cure diseases, but he objects to them on account of the aggravations they are likely to cause.

I only reiterate the belief of our best Homœopaths, when I assert that material doses do cure diseases homœopathically; but at the same time, I as strongly incline to the opinion expressed by all experienced physicians of our school, that the nearer we approach the exact *similium* in the selection of a remedy, the higher we may go in the scale of dynamization, with the most uniform success. In such case, to borrow a poetic expression,

“Tenth or ten-thousandth breaks the chain alike.”

To make the matter more plain and certain in relation to the value of material doses, we will repeat the above formula, slightly modified:

1. There is only one law of cure, *Similia Similibus Curantur*.

2. The dominant school have effected veritable cures with material doses.

3. Therefore, material doses will cure disease under the Homœopathic law of cure.

To conclude this argument, let it be said that I advise, in all cases when possible, that we use medicines whose effects upon the healthy are known and recorded, and that such medicines be given in as *small* a dose as will effect a cure. But at the same time, I maintain that we can rightfully and successfully use drugs upon strictly empirical data, based upon accurate observation, and that we can rightfully use moderate material doses, and yet not violate the slightest our great law of cure.

Those who have read my *Article on Dose* in the *North American Journal*, will more fully understand the view I take of this matter. No physician can fully appreciate the value of certain new remedies until he has tested them in disease. In some forms of fever, we find that Aconite will not be specific to the morbid condition; but when we resort to Gelseminum, the febrile irritation vanishes as before the wand of the magician. In certain typhoid states, Belladonna, Bryonia and Rhus tox are powerless, but the curative principle residing in the *Baptisia* root seizes upon the typhoid poison in the blood and exterminates it.

Those who have had much to do with bilious disorders, dysenteries, etc., have often been left in the lurch by Mercurius, Nux Vomica or Bryonia, but a resort to Podophyllin or Leptandrin has helped them through with the most desperate cases. The treatment of that terrible scourge of our soldiers, chronic diarrhoea, would be very imperfect and unsatisfactory, did we not use the *Leptandria Virginica*.

In the diarrhoea and cholera infantum, which yearly carries thousands of our beloved little ones to the grave, those excellent remedies, Chamomilla, Mercurius, Arsenicum and Veratrum do often fail, while we can sometimes resort with confidence to Euphorbia Cor., Iris Ver. or Podophllum with perfect success.

In Pneumonia, we rarely, if ever, can absolutely cut short the progress of inflammation with Aconite and Bryonia, Phosphorus or Tartar Emetic; while I solemnly assert that with Veratrum Viride I have arrested the inflammatory process after it had become established, on the fifth and sixth day of the disease.

Who has not found acute rheumatism intractable under the careful use of Bryonia and Rhus? Yet we have often resorted to the Cimicifuga, with a result beyond our most sanguine expectations. In chronic rheumatism, all the old remedies may be "tried and found wanting," yet the Phytolacca, dec., will dissipate the malady in a short time; indeed, in the so-called *periosteal* rheumatism, whether it be syphilitic or not, it is an absolute specific.

In some diseases of the heart, Digitalis will not have the desired effect, neither will Spigelia, Aconite or Lachesis; but the Cimicifuga, Verat Viride or Lycopus, will quiet its tempestuous beating, and regulate its abnormal action.

Some cases of general debility resist China, Phosphoric Acid and Arsenicum, but yield readily to Hydrastin, Helonin or Cornus Florida. In active arterial hemorrhages, Aconite, Sabina, Crocus, and other approved medicines, fail to arrest the waste of vital fluid, while Erigeron Canadensis,

Trillium Pendulum or Sanguinaria, will stop the outflowing current and close up the avenues of its escape. In the treatment of venous hemorrhage, who would like to dispense with Hamamelis and rely solely upon Pulsatilla?

We have some excellent remedies, which do us good service in the management of those distressing maladies to which females are liable. We could hardly dispense with Chamomilla, Pulsatilla, Ignatia, Sepia, or Coffea; but who that ever tested the virtues of Caulophyllum, Macrotin or Scutellaria upon the suffering organisms of his delicate patients, would like to reject them, because they have not been extensively proven?

Our remedies are generally useful in the treatment of the severest urinary disorders; yet I have known cases which have resisted the action of Cantharis, and others yield in a few days to the curative power of Chimaphilla. Few are aware of the extraordinary virtues of Apocynum Cannabinum in dropsies, yet it has cured cases which grew worse under the use of Apis, Arsenicum and Helleborus niger.—*Medical Investigator*.

[To be Continued.]

AILANTHUS.

BY P. P. WELLS, M. D. BROOKLYN, N. Y.

From the American Homœopathic Review.

In an interesting paper on Scarlatina, the writer says—There is another agent which there is some reason for believing may be found valuable in the treatment of this variety of Scarlet Fever—the poison of the Ailanthus. The following case came under the observation of the writer:

A girl, fifteen years of age, rose in the morning feeling slightly ill, dressed and went immediately to the breakfast-table. She could take no food; the sight of it made her feel so much worse she immediately left the table, and went to her room. She was seized suddenly with violent vomiting, severe headache, intolerance of light, dizziness, hot, red face, inability to sit up, rapid small pulse, drowsy, at the same time very restless, great anxiety. Two hours after the first attack, the drowsiness had become insensibility, with constant muttering delirium; did not recognize the members of her family. She was now covered in patches, with an eruption of miliary rash, with efflorescence between the points of the rash, all of a dark, almost a livid, color. The patches between the points were of a dingy, dull opaque appearance. The eruption was more profuse on the forehead and face than elsewhere, and especially on the forehead. The whole aspect of the eruption, and the whole condition of the patient, were so just like those so many times

seen in the cases of this variety of Scarlet Fever, that the case was unhesitatingly recognized as an example of it, and in its most violent and hopeless form. The pulse was now small, and so rapid as hardly to be counted; the surface had become cold and dry; the livid color of the skin, when pressed out by the finger, returned very slowly; the whole was a most complete picture of torpor, and seemingly a perfect instance of that manifestation of it which immediately precedes dissolution in these rapidly fatal cases of Scarlet Fever. There was apparently no prospect of the patient's living more than a few hours. Such cases in the practice of the writer had always gone to a fatal termination, and this had been more rapid in its progress than any he had seen. The patient being his own child, he had opportunity for most carefully watching the case. In about three hours from the first appearance of the eruption, the livid color began to lose something of its dark hue; the restlessness and anxiety diminished; the pulse became more distinct and less frequent; consciousness partially returned; the eruption became a brighter red; and the whole train of symptoms so similar to this pernicious form of the fever gradually gave place to a train of phenomena scarcely less remarkable, but not at all like those of any variety of Scarlet Fever.

Of course this was not a case of Scarlet Fever at all; but for a short time it was a very great puzzle. What could it be? what could have produced it? were questions not to be put aside, and when consciousness had so far returned that questions could be intelligently answered, the nature and cause of the case were no longer a matter of doubt. As the eruption began to lose its dark hue and take on a brighter red, there was a repetition of a series of symptoms, then recently treated in the case of a small lad who had been poisoned by eating the seeds of the *Ailanthus*. This resemblance was a surprise, and at once excited suspicion that this was also a case of similar poisoning. And so it proved to be. It was produced in this manner. This patient and one of her young associates had been amusing themselves, the evening before the attack, by stripping the outside bark from the young and tender shoots of the *Ailanthus*, and then, after writing letters on the stalks with the point of a pin, these were moistened with saliva which was rubbed on them by the end of the finger. This was many times repeated, and in this process the juice of the stalk was conveyed to the mouth in considerable quantities. Its taste was an intense bitter. Both the experimenters were made ill, *with similar symptoms, but the symptoms were much less vio-*

lent in the patient's friend. It is a singular fact that this patient has been attacked by a similar miliary rash each year since this poisoning, at the *season of the blossoming of the Ailanthus*, and is always now more or less ill each year from this cause. This case is here in part presented to the reader for what it is worth. That it was the result of the *Ailanthus* poison is sustained by the fact that the juice of the green stalks was introduced into the mouths of the two girls, that they both, soon after, sickened, suffering from similar symptoms, differing chiefly in degree of severity rather than in kind; and in the case of my patient showing subsequently a train of symptoms precisely like those witnessed in the case of a lad who was poisoned by eating the seeds of this tree.

The case is also given here with the object of urging on the profession the importance of a thorough proving of this powerful poison. If the subsequent history of my patient can be received, as showing in her sufferings the continued workings of this poison, and if drug agents are indeed related to diseases as curatives by the law which we receive as the universal law of cure, then the relation of the *Ailanthus* to many important diseased conditions is clearly established, and the importance of a knowledge of this relationship, in its details, to both practitioner and patient, needs no argument to show. Let the *Ailanthus* be proved.

MEDICINAL USE OF WINES AND LIQUORS.

Having been asked why we would not prescribe alcoholic liquors medicinally, or keep them for sale in our Pharmacy, we present some remarks on the subject.

Against unfermented grape juice we have nothing to advance, but fermented liquors are objectionable, because they contain Alcohol, which is poisonous—not nutritious. Men speak of wines, &c., as if they were nutriments. They are greatly in error. Nutriment is a substance which is capable of being assimilated to the body, that they may form a portion of the system, such are meats, fruits and vegetables. These all contain matters similar to the component parts of the human frame. They are readily converted into blood, and from the blood all the organs are formed or fed. Alcohol is never assimilated, cannot be converted into blood, is never found in a healthy human body, is not strength-giving, health-giving, or life-giving, but on

contrary, it is to every human being a positive poison. The late Professor Mussey (Ohio Medical College,) said, "That Alcohol is a poison to our organization is evident from observation. * * * What is a poison? It is that substance in whatever form it may be, which, when applied to a living surface, disconcerts life's healthy movements. * * * Such a poison is alcohol; such in all its forms, mix it as you may. *It is never digested* and converted into nourishment."

The alcoholic drink stimulates the heart to increased action, and then excites the brain. There will not be a steady and equal exaltation of the mind, but an irregular and erratic action; this is incipient insanity. The same condition, in a higher degree, is insanity. One-third of all the insane in our lunatic asylums were maddened by drink. The official reports will state hereditary influences and other causes, and we do not deny their power; yet all these might have remained inoperative for life, had they not been developed through the infernal influence of intoxicants.

The dram drinker looks for his daily portion, and supposes that he is merely gratifying a *natural* appetite, but he is deceived. There is no such thing as a *natural* appetite for such an unnatural thing as alcoholic liquor. Alcohol is obtained by a perversion of food. Substances prepared by the hand of the Almighty Father for the support of animal life, are taken by man, and by his art converted into that, which instead of sustaining life, destroys every organ and tissue of the human frame. The children's bread is cast to the dogs indeed, when it is half rotted, and then converted into liquors, which to the impoverished appetite are as the very quint essence of putridity. No infant of temperate parents will receive a drop of such stuff without loathing. The appetite for such things is always acquired, never natural.

Many tell us that they do not take liquor for pleasure's sake, but because their systems are debilitated, and they need a stimulus. They know that they really do require something to give tone and vigor to their systems, because they feel so bad

when they relinquish their use, even for a single day. Surely wine is a mocker—how foolish are they when thus deceived. Slaves are they hugging their chains. Fools are they boasting of their folly. Their condition is one of disease, and the continued use of intoxicants produces aggravation, not alleviation. These *stimulants* are *not strengtheners*. Each article of this nature, be it wine, spirit, cordial, or ale, produces two effects which are directly opposite to each other: one is the first, or primary effect; the other the subsequent or secondary effect. The first is exciting, the second depressing. For a time the user of the drink feels better, stronger, more cheerful, perhaps more active in thought, better prepared for exertion; but after a time the reactive effect is manifested, and debility occurs fully equal to the stimulation which had been unnaturally procured. No one can indulge in stimulants and avoid this recoil. That person who is unwilling to rely upon food and exercise for strength, as provided by God, but will attempt to improve upon his arrangements, will certainly suffer.

Another deception under which moderate drinkers labor, is, that a little is useful to cheer the desponding and embolden the fearful. 'Tis said that wine "cheereth God and man," so they imbibe when they have the blues, and drink freely when they lack backbone. *Poor souls!* Wine is a mocker—a deceiver indeed. The gracious grape juice of Canaan, invigorating with its nutriment all the system, and giving pure animation without intoxication,—that was cheering drink indeed; but what resemblance to this beverage have the liquors of the present day? None!

Another deception is the idea that the use of a mild drink such as beer, ale or cider, will *not* create an appetite for a stronger. English legislators were disposed to encourage the manufacture of beer, supposing that it would tend to the decrease of intoxication, but it has had a contrary effect, and those who now speak of banishing drunkenness by the introduction of native wines, are merely attempting to cast over one devil, or form of evil, by another. We

have just read an article on this subject, by "Medicus," a contributor to the N. Y. *Independent*, which pleases us so well we will copy it entire :

NATIVE WINES AND NATIVE GRAPES.

A false notion is gaining ground that the use of the native wines of the country, now being manufactured quite extensively, is going to promote the cause of temperance. Nothing can be further from the fact. Though perhaps innocently, those who advocate this doctrine are, I believe, using, if not "stealing the livery of heaven to serve the devil in." No doubt but wines are less injurious than whisky and brandy; and if those who use them, and always will use them, would substitute wines, they would be benefitted. Such, however, will not be the result; but those who do not use intoxicating liquors at all now will drink them, instead of those who use the whisky and brandy. This is already showing itself to be the case. Fruit wines within the last few years have been extensively made and used all over the country, from currants, strawberries, rhubarb, etc., by hundreds of families who never use the coarser kinds of liquors. Even women and children drink these, though they would not touch brandy or whisky; indeed, the strongest advocates for the manufacture of wines are found among the gentler sex. The idea that they are not intoxicating drinks, however, is erroneous. The whole history of the old world proves that they produce drunkenness, "steal away the brains," and make one "speak parrot, and squabble, and swagger, and swear, and discourse fustian with one's own shadow."

One of the drawbacks to the temperance cause is the very extensive use of alcoholic stimulants in some form as a medicine. Physicians think they must prescribe them for diseases, and those who have any little ailment learn to prescribe them for their own case, for their friends, and finally to advocate their use as a means of "promoting the cause of temperance." There is one very important lesson the medical profession must learn, and that is, that wine is not important or even necessary as a medicine. If they would prescribe fresh air and sunshine where they prescribe liquors, they would do more to cure disease than now. We are soon to live in a country where slavery will be unknown. God is breaking the chains and letting the oppressed go free. A few years ago we had not learned that we could have cotton, and sugar, and rice, without slavery. We want also a country without drunkenness; and one of the first steps toward it will be to learn that we can have health without wine and alcohol, as

well as sugar and rice, and cotton, without slavery. We must also learn that alcohol is not a "proximate principle" of food, as the chemists have it. When the young student is taught in his text-books that alcohol, wine, beer, and ale are "respiratory food," he is put into a condition to believe that it is not objectionable to use them, particularly if in the form of wine.

Quite recently, Mr. J. H. Klippart, now and for many years the secretary of the Ohio State Board of Agriculture, wrote in *The Ohio Farmer* an article on "Grapes and Wine," in which he took ground that the wines of Ohio were much more intoxicating than European wines; and, on that account, if no other, their general use should not be promoted. This is an important fact. As long ago as the earliest history, the wines of the Old World have been known to breed drunkenness.

But let me turn from the subject of wine to that of grapes; for, while the former has no normal relation to the organism, the latter is one of the best and most wholesome fruits that grow. Grapes, as a food for the sick, have a very high value. In some parts of Germany the "Grape Cure" is popular for the recovery of many diseases, the patient kept on little or nothing else for several weeks. Prof. Lee, in *The American Medical Times*, has given an account of some marvelous cures wrought by this means, and the writer has known several cases of disease treated by grapes with most happy results. They ought to be more extensively used for that purpose, instead of wine. As an article of common diet, grapes are invigorating, and their nutritive value is much greater than is intimated by a chemical analysis. As a desert for the table, in place of pies and cakes, they are superior; and, if used, would save housewives much valuable time from cooking, which might be very profitably devoted to intellectual culture. He who will discover the cheapest and best mode of preserving them fresh for months will deserve the thanks of the country. Their culture should increase, and their normal use be greatly extended.

TREATMENT OF DROWNING.

The following rules have just been issued by the Royal Humane Society. They are stated to be "the results of the labors of the committee of the Royal Medical and Chirurgical Society of London."

DIRECTIONS FOR RESTORING THE APPARENTLY DEAD.—I. *If from drowning or other Suffocation or Narcotic Poisoning.*—Send immediately for medical assistance, blankets, and dry clothing; but proceed to treat the patient instantly, securing as much fresh air as possible.

The points to be aimed at are: first, and immediately, the restoration of breathing; and, secondly, after breathing is restored, the promotion of warmth and circulation.

The efforts to restore life must be persevered in until the arrival of medical assistance, or until the pulse and breathing have ceased for at least an hour.

TREATMENT TO RESTORE NATURAL BREATHING.—Rule 1. To Maintain a Free Entrance of Air into the Windpipe.—Cleanse the mouth and nostrils; open the mouth; draw forward the patient's tongue, and keep it forward; an elastic band over the tongue and under the chin will answer the purpose. Remove all tight clothing from about the neck and chest.

Rule 2. To adjust the Patient's Position.—Place the patient on his back on a flat surface, inclined a little from the feet upwards; raise and support the head and shoulders on a small, firm cushion or folded article of dress placed under the shoulder-blade.

Rule 3. To Imitate the Movements of Breathing.—Grasp the patient's arms just above the elbows, and draw the arms gently and steadily upwards, until they meet above the head (this is for the purpose of drawing air into the lungs); and keep the arms in that position for two seconds. Then turn down the patient's arms, and press them gently and firmly for two seconds against the sides of the chest (this is for the object of pressing air out of the lungs). Pressure on the breast bone will aid this.

Repeat these measures alternately, deliberately, and perseveringly, fifteen in a minute, until a spontaneous effort to respire is perceived, immediately upon which cease to imitate the movements of breathing, and proceed to induce circulation and warmth (as below).

Should a warm bath be procurable, the body may be placed in it up to the neck, continuing to imitate the movement of breathing. Raise the body in twenty seconds in a sitting position, and dash cold water against the chest and face, and pass ammonia under the nose. The patient should not be kept in the warm bath longer than five or six minutes.

Rule 4. To Excite Inspiration.—During the employment of the above method, excite the nostrils with snuff or smelling salts, or tickle the throat with a feather. Rub the chest and face briskly, and dash hot and cold water alternately on them.

The above directions are chiefly Dr. H. R. Silvester's method of restoring the apparently dead or drowned, and have been approved by the Royal Medical and Chirurgical Society.

TREATMENT AFTER NATURAL BREATHING HAS BEEN RESTORED.—Rule 5. To Induce Circulation and Warmth.—Wrap the patient

in dry blankets, and commence rubbing the limbs upwards, firmly and energetically. The friction must be continued under the blankets or over the dry clothing.

Promote the warmth of the body by the application of hot flannels, bottles or bladders of hot water, heated bricks, etc., to the pit of the stomach, the armpits, between the thighs, and to the soles of the feet. Warm clothing may generally be obtained from bystanders.

On the restoration of life, when the power of swallowing has returned, a teaspoonful of warm water, small quantities of wine, warm brandy or water, or coffee, should be given. The patient should be kept in bed, and a disposition to sleep encouraged. During reaction large mustard plasters to the chest and below the shoulders will greatly relieve the distressed breathing.

II. *If from Intense Cold.*—Rub the body with snow, ice, or cold water. Restore warmth by slow degrees. In these accidents it is highly dangerous to apply heat too early.

III. *If from Intoxication.*—Lay the individual on a bed with his head raised. The patient should be induced to vomit. Stimulants should be avoided.

IV. *If from Apoplexy or Sun-stroke.*—Cold should be applied to the head, which should be kept well raised. Tight clothing should be removed from the neck and chest. Stimulants should be avoided.

Appearances which Generally Indicate Death.—There is no breathing or heart's action; the eyelids are generally half closed; the pupils dilated; the jaws clenched; the fingers semi-contracted; the tongue appearing between the teeth, and the mouth and nostrils are covered with a frothy mucus. Coldness and pallor of surface increase.—*Brit. Med. Journal.*

WHEN WILL THE NEW BOOKS BE OUT?

A correspondent says: "I am waiting for the prospectus of *Drs. Marcy & Hunt's Practice*, *Dr. Hempel's New Materia Medica*, and *Franklin's Principles and Homœopathic Practice of Surgery*. I trust these several parties will bring forth works worthy of being named "Homœopathic," and not such miserable abortions as Peters and Snelling have produced in their collection, styled "Principles and Practice." I deem the work throughout the emanation of Peters' brain. Snelling had but very little, indeed, to do either with the conception or the producing thereof. But enough of this talk for the present. I am well pleased to be enabled to turn from the labors of such, and find in our ranks men who produce that which is of present value, and will prove in all time

serviceable to mankind. I am constrained to join with all the medical men of a true stamp and spirit in thanking you for the journal you send us each month. I have been aided thereby in my labors far more than I can express. I feel moved by the spirit to take a large stock in this enterprise, by contributing somewhat to fill up its pages with practical matter, and aid in instructing others, if in no other manner than by simply making inquiries that will start their thoughts into "new channels."

We can merely reply that the work of Dr. Hempel will consist of 2 volumes; that of Drs. Marcy and Hunt, 2 volumes; that of Dr. Hale, 1 volume, octavo. *All in press.*

For the American Homœopathic Observer.

DIFFICULTIES IN HOMŒOPATHIC PRACTICE.

BY THOMAS B. LAMB, M. D.

I do not expect to instruct my older colleagues who have been with me and before me in the practical investigation of the law *Similia Similibus Curantur*, but it may not be altogether amiss to endeavor to amuse them by a little conversation in reference to the difficulties to be encountered and overcome in such pursuit.

Like many who have undertaken to apply the law as a first experiment, I was so surprised that I became (excuse the unique comparison,) as the Apostle of Christianity at his conviction, blinded by the ray of light which so suddenly burst upon me. But my prejudices were against my convictions, and it was only after repeated trials that I became converted to the doctrine, that there exists a *pole star* in medical Therapeutics which ever existed, even in darkness. After thus experimenting, and successfully, I was vain enough to think (for I was young and sanguine) that the medical fraternity would soon consist of a band of brothers, walking by the *light*; and that our public schools would soon be opened for teaching "The way of Life."

And here is a first difficulty at present incident to the student of Homœopathy.

While our Allopathic brethren can approach our public schools and appropriate *public funds* to assist them to obtain the necessary knowledge of Anatomy, Physiology, Surgery, Chemistry, Materia Med-

ica, etc., the student of Homœopathy must seek abroad, and at his own expense, all these which are indispensable to the successful practice of *healing the sick*.

Allied to this is the prejudice which is always fostered in the public mind by the opponents of the system by the old school practitioners; and it is done by every available means, even if the teaching is contradictory and untenable. Instance—"There is no medicine in the Little Pills." Ergo it is useless to take them or to employ a homœopath.

Then, perhaps, thinking the opposite idea will serve a purpose, they say "The medicines are poisonous and very hurtful, etc. About as nice a joke as was ever practiced on me in my short career was in this wise. I was called to prescribe in a certain case of sickness which had been aggravated, probably by excessive medication recommended by my immediate predecessor—self-styled Botanic—Physician. I left some pellets of pure *saccharum lactis*. I was discharged on my next visit, with the observation of my patient "Your medicines are so *strong* I cannot use them! But this differed from many cases of poisoning. My patient improved rapidly without further medication, and my *fees were paid!*"

And this brings to our mind another difficulty which so often presents itself in locations where the true light hath not shone—previous medication. Many have received the idea (and learned it from the Doctor too) that there is no harm in a dose of pills!—especially if they are purely vegetable! And there can be no harm in this syrup—for it was compounded from barks and roots! Alas for humanity. "These pills" and "that syrup" perhaps may have developed a "gastro-enteric inflammation" which requires time at least, and perhaps skillful appliances, and much patience on the part of the patient and practitioner, to overcome. Another—knowing that our remedies often bring about most astonishing and pleasing results after attenuation, and that the gross medicine *sometimes* aggravates and protracts disease! we have used attenuated remedies, without apparent results, with desire to benefit our patient with the gr

est certainty. Thus the cure may be protracted somewhat. While our allopathic coadjutors have a seeming advantage by an immediate change of symptoms or suppression of the prevailing manifestations of disease, and the casual observer thinks it a cure!! [See many cases of inflammatory diarrhoea treated with opiates during the last score of years in Michigan. Also of dysentery, technically so termed, for ages past!]

Another difficulty is the often occult action of disease on the internal organism, rendering our prognosis uncertain and often unsatisfactory.

And lastly, I will mention the great *Incubus* which rest on many practitioners even—ignorance!! I do not intend by the term its literal meaning as commonly adopted, but this: Homœopathy is yet in its infancy! We have observed the great advantages of small doses of medicines in many respects as compared with the old school system of—"a decided impression," and we have somehow adopted a system of small doses (as a common term expresses it) and generalization, while our faith rests upon what others have taught, and we may not have had sufficient experiment with others, and our own individual organism, to know that we must select a remedy which is specific, to cure.

I beg leave to say that I have been very much interested with the many communications from different individuals of the profession as seen in the OBSERVER and peculiarly so with that from Prof. Hempel in reference to dose. Let us seek the Light.

REAL AND APPARENT DEATH.

The biographer of Mr. Prescott, the historian, relates that after his death, and before his burial, which was four days subsequent, two wishes which he had earnestly expressed were fulfilled. One was, that his remains might rest for a time in his room "where his intellectual treasures were gathered," in his library where he had spent so many delightful hours; the other was, that "a principal vein should be severed," so that, if life should again be awakened, it might ebb silently away without any possible return of consciousness." This last request was made because he had always entertained a peculiar dread of being buried alive.

Let no one put this down as an idle or superstitious fear. The instances clearly authenticated of premature burials, are probably more numerous than most persons are aware of, and they suggest the thought, too painful to dwell upon, of the instances, more numerous still, which have never come to the knowledge of the living. So little do we know of the mysterious transit from this world to the other, which we call death, or what time may transpire between the last sleep and the waking up amid the immortal scenery, that the tenderest caution and care should be observed, and real death clearly distinguished from apparent.

A late work filled with quaint and striking things which were culled from old authors and new, entitled "Mysteries of Life, Death and Futurity," has a chapter on "premature interment," citing many cases where apparent death was mistaken for real. It will serve a useful and salutary purpose to refer to two or three. Dr. Paris (the same, we suppose, who was the physician of John Randolph,) is given as authority for the fact, that the daughter of Henry Laurens, the first President of the American Congress, when young, was laid out as dead. The window of the apartment, that had been carefully closed during the progress of the disease, was then thrown open to ventilate the chamber, when "the fresh air revived the corpse, and restored her to the family." Her father was so powerfully impressed with this circumstance, that in his will he directed that his own body should be burnt, and enjoined the performance of this wish as a sacred duty upon his children.

A physician of Paris, M. Bruhier, published, many years since, a work entitled "The Uncertainty of the Signs of Death," in which he proves, "from the testimony of various authors and the attestation of unexceptionable witnesses," that many persons who had been supposed dead, and been passed through the funeral rites, had been providentially rescued from the grave, and lived many years afterward. He condemns the practice of removing the bed-clothes, and exposing the body to the chill air, as soon as the semblance of death appears. Cases are cited of trance, having all the external appearance of death, which continued seven or eight days, followed by a return to life. Sometime there is a total insensibility; sometimes the consciousness is not suspended, and the subject knows all that is taking place in the room. The following instance of this kind is given from the "Psychological Magazine":—

"A young lady, after lying ill for some time, to all appearance died. She was laid in her coffin, and the day of her funeral was fixed. When the lid was about to be screw-

ed down, a perspiration was observed on the body; life soon appeared; and at length she opened her eyes and uttered a pitiable shriek. She said that she was perfectly conscious of all that happened around her in this dreadful state. She distinctly heard her friends speaking and lamenting her death at the side of her coffin. She felt them pull on the dead-clothes and lay her in them. The feeling produced a mental anxiety which was indescribable. She tried to cry, but her soul was without power, and could not act on her body. She had the contradictory feeling, as if she were in her body, and yet not in it, at one and the same time. The internal anguish of her mind was, however, at its utmost height, when the funeral hymns were being sung, and when the lid of the coffin was about to be screwed on. The thought that she was to be *buried alive* was the one that gave activity to her soul and caused it to act on the corporeal frame."—p. 161.

There are indubitable signs of death which occur sooner or later; and it is better to wait for them than to incur the awful hazard which such cases warn us against. In 1703, a Dr. Hawes, of the Presbyterian Church, preached a sermon "On the Duty of the Relations of those who are in Dangerous Illness, and the Hazard of Hasty Interment." The facts related in it are sermons in themselves.

Dr. Doddridge, at his birth, was laid aside as dead. One of the attendants, however, took him into her keeping and warmed the latent spark into a flame and so some of the best hymns in our collections uttered their music on these shores of mortality, instead of breaking first on heavenly air; and some of the most evangelical sermons were preached for the conversion of sinners. The good nurse, whoever she was, deserves a place in the saints' calendar.

HELMINTHIASIS.

An extract of Dr. B. Bæhr's work. "The Therapeutics according to the principles of Homœopathy." By F. X. SPRANGER, M. D.

For want of space I can only give an outline of this very interesting chapter of the above named work. He describes as the most general occurring varieties of worms; the *ascaris vermicularis*, *ascaris lumbricoides*, and the *tænia solium*. He argues the theories of Hahnemann and Hartmann, concerning the etiology, and affirms that the first two species are already introduced to the system as larvæ, by the excessive use of farinaceous food. He says, that we find

the larvæ of the *Tænia*, the *cysticercus* most frequently in the swine, more seldom in cattle; roasting or smoking will kill it, and can therefore only be introduced into the system capable of developing itself, by diet consisting of raw or insufficiently smoked meat. The circumstance explains why it is so seldom met with in countries where very little pork is consumed; also with Jews; on the other hand its frequent occurrence in middle ages. Since it has become fashionable, to feed raw flesh to children, the author has had frequent opportunities to notice tape-worm at as early an age as $1\frac{1}{4}$ years. The treatment, he says, must first be conducted to remove the cause, by expelling the worms and regulating the diet, not allowing much farinaceous food, and then to remove the secondary symptoms by the proper homœopathic treatment. The *Oxyuris vermicularis* are far the hardest to expel, since the worms are generally seated in the colon, and we cannot bring the poison in contact with them by internal use without causing medicinal symptoms. Therefore the best procedure will be enemata, various substances have been used, but above all the author has had the best success with *Allium sativa*, the common garlic. A few drams of fresh garlic are to be cut up fine, and scalded with hot water, and as soon as it is sufficiently cool to be injected in a considerable quantity and force, to come in contact with the entire colon, because it will kill every worm it comes in contact with; if necessary it should be repeated. For the *lumbricus*, he recommends the *Trochisci Santonini* containing 1 grain each, from 2—4 of them to be given to the patient when going to bed, on two successive evenings, careful to abstain from farinaceous diet for a few days before. The best time for administering is during the decline of the moon.

The tape worm also first requires its removal, before we can treat its consequences. The best remedies are *Punica Granatum*, *Polipodium filix mas*, *Kousso* and *Rottlera tinctoria* (Kamula.) Among these *Kousso* takes the first rank, as creating the least medicinal symptoms. Use it in the following way: put $2\frac{1}{2}$ to 3 drams *Pulvis floræ Kousso* into a beer glass full of cold water.

being careful to stir it well, and have none floating on the water dry. This is to be prepared in the evening, and to be drank next morning in two portions, at the interval of half an hour. The worm is discharged within $1\frac{1}{2}$ to 4 hours, as I have frequently observed several cases. To avoid nausea it is well to take a strong cup of coffee or a little lemon juice, a little while before taking the medicine. No preparatory cure is necessary, only abstain from farinaceous food for a day previous.

WHY NOT?

Dear Doctor—Your notice of the fact that the W. H. College had excluded females from graduation, was followed by the above significant query. And I beg leave to reply, that it is not because we deny the right or propriety of acquiring medical knowledge to the female sex. Their ability to do so is unquestioned. But we have found that in spite of all our efforts to the contrary, the presence of females in our classes, has had a prejudicial effect. While the society of females is generally sought by young men under most circumstances, yet in the lecture room, the majority of the classes have had a great repugnance to female association, however fair or talented the ladies might have been. However, the above query has no reference to the attendance of the ladies on lectures, but to the question of their graduation. Now, it is known that a diploma is a guarantee of the possessor's proficiency in all the various branches that constitute medical science, and we feel safe in saying, that however perfect the ladies may become in other departments, they never succeed in passing with honor the chair of surgery. Except in a very few instances, we have been enabled to grant degrees to them, only by looking with a very lenient eye upon their proficiencies. They have seldom or never come up to the proper standard of scholarship. Finally, while it looks very well as a matter of theory, for woman to qualify herself for the high and holy work of ministering to afflicted man, *yet in practice*, it has turned out almost *without exception*, that our female graduates

have been by their tastes and nature, unable to meet the arduous duties and important responsibilities of a general practitioner. That many of them might become adepts in certain departments of medicine, we are fully convinced; but that they are ever qualified by nature or acquirements, to answer the duties that a diploma so unqualifiedly set forth, we are forced most unwillingly, and with pain, to deny. Hence, we deem it our duty no longer to impose upon them obligations they can never fulfil. And we shall avoid making promises to a trusting public, that we are convinced will never be met.

F. P. W.

CLEVELAND, O. April 4, 1864.

BRIGADIER GEN. EDWARD A. WILD, AND THE ROANOKE ISLAND COLONY OF FREED PEOPLE.

American Homœopathic Review says: "Gen. Edward A. Wild, in command at Norfolk, Va., was formerly a homœopathic physician, at Brookline, Mass. At an early period of the war he relinquished a lucrative practice and entered the field as a captain in the First Massachusetts Regiment. Here he was of great service in furnishing such of the regiment as desired it homœopathic treatment, and so popular did the system become that a petition to Congress asking for the appointment of homœopathic surgeons in the army, was signed by all the staff-officers, excepting the surgeon, by all the field-officers, by nearly all the line officers and by more than half the rank and file. Notwithstanding he has lost his left arm at the shoulder and the use of his right hand except two fingers and a thumb, he still maintains his post and devotes his energies to the performance of his military duties. He had charge of organizing the colored troops at Newbern, last summer, and his recent successful expedition of colored troops into North Carolina will be remembered by many of our readers."

We have many Homœopathic physicians in the U. S. Army, not acting professionally as surgeons, but in other capacities. Of these noble men there is probably no one better deserving special commendation, than Gen. Wild now in charge of the freedmen on Roanoke Island. Our object, however, is not to praise the General, but to show you that there is an opportunity offered of evincing

your appreciation of his patriotism by assisting the distressed under his care.

"Edward W. Kinsley, Esq., a well known merchant and philanthropist, of Boston, just now returned from a visit to Gen. Wild's Colony of freed people on Roanoke Island, reports, that in consequence of their so recent escape from slavery, and the terrible ravages of small-pox among them, they are in a state of deep distress, and of pitiable destitution.

"The Colony already numbers thousands, and is continually increasing. Its numbers are made up of the wives and children, and aged and disabled persons of the families of the brave men in "Wild's Brigade," with such others, as by his liberating hand, find shelter there.

"Their prime necessities are, food, raiment and shelter. And if with these they have the requisite supplies of garden seeds, fish-lines, seines, agricultural implements, and other common means of securing a crop, it is confidently believed they will thenceforward become a self-supporting people.

"The small-pox is making fearful ravages among them, and, as a sanitary measure, their clothing must *all* be burned; and thus large numbers of them are left entirely naked! Indeed, Mr. Kinsley, at a public meeting made the statement, that in one of the Small Pox Hospitals, fifty convalescent patients could not be discharged for the want of clothes! And this, too, when others laboring under the foul disease desired, but could not obtain entrance!

"Beside this, their utter lack of clothing, such is their destitution of bed linen, that sick patients are absolutely obliged to sleep between blankets instead!

"To give courage and cheer to the brave and absent husbands and friends of these distressed ones,—to remove a heavy burden from the heart of General Wild, and to render *immediate* aid to his suffering Colony, the citizens are earnestly entreated to collect together, and make ready of the articles needed, such Samaritan supplies as their means and hearts shall dictate. Especially not forgetting clothing adapted to persons of all ages and both sexes; and other articles that may help them in raising supplies of food and means of shelter."

Contributions of clothing, etc., sent to Dr. Lodge, Detroit, shall be duly forwarded.

For the American Homœopathic Observer.
GNAIACUM OFFICINALE, AS A REMEDY IN DIPHTHERIA.

BY ASA S. COUCH, M. D.

The importance of the above drug as a remedy in Diphtheria, was first publicly al-

luded to by the writer in an article read before the last semi-annual meeting of "The Hom. Med. Soc. of the State of New York." It was then claimed that it would prove one of the most important and reliable specifics, in this disease.

Subsequent observations have served to confirm that conviction. The clinical observations of its curative effects in many cases of rheumatism, first directed attention to it in this connection. No observer can fail to have noticed the frequency of rheumatic complications in Diphtheria. Rheumatic affection of the cervical muscles is a very frequent attendant upon it, while general rheumatic pains are not uncommon. Several cases of inflammatory rheumatism have also been observed by the writer to follow closely upon convalescence from this disease.

The following (among other) symptoms indicating its use, may be found in the provings of the remedy: Exhaustion, as after great exertions, especially in the thighs and arms, shuddering and feverish chill in the back; *internal chilliness* through the whole body, followed by heat, especially in the face, without thirst, towards evening; disinclination to labor, headach across the forehead, swelling of the eyes, *painful dragging and lacerating in the left ear, the face is red* and painfully swollen, *dull ache* in the left jaw, nausea, occasioned by a sensation as if mucous were in the throat, violent vomiting of watery mucous, with great exertion, constrictive sensation in the epigastric region, with anguish and difficult respiration, dry cough, returning until some expectoration set in, cough with expectoration of fetid pus, aching in the nape of the neck on the right and left sides of the vertebræ.

Now, the provings of this remedy are very meagre, and yet quite a number of the foregoing symptoms, are strongly characteristic of Diphtheria. A more thorough proving would undoubtedly develop equally characteristic, if not pathognomonic symptoms of it. It is to be hoped that it will be accomplished.

But passing over any further reference to its homœopathicity in the case, it is offered as a fact that its employment in cases where

it was at all indicated, has proved more satisfactory than any other single remedy exhibited by the writer in the disease. That it will prove efficacious in all cases is not expected, but a trial of it in cases accompanied by rheumatic pains, is earnestly recommended.

With reference to its administration, it is probable that the *potencies* will not prove serviceable. The manner in which I have used it has been to add a half drachm of the mother tincture to a tumbler half full of sweet milk, and of the mixture, give a dessert spoonful every hour to three hours, according to the urgency of the symptoms. Reports of cases are omitted, for fear of occupying too much space.

CANNABIS INDICA.

MR. CARL BOWER communicates to *American Druggist's Circular*, the following experiment with Cannabis Indica:—

I had taken on different occasions of the extract, from one to three grains without any noticeable effect, and after repeating it several times increased the dose to five grains, from a new lot which we had just received. I took the dose after dinner, about two o'clock; and as I had failed so often in obtaining its medicinal action in the least, I commenced my usual work in the laboratory thinking no more about it, till half an hour after, when I was suddenly reminded of it by a peculiar feeling I experienced, that could be compared to a warm stream of water, which gradually stole up my back and made its way to the brain. At the same time I had a very dry mouth and fauces, so that I could hardly swallow or speak; intense and rapid beating of the heart, and widely dilated pupils; my pulse was 150 to 160 per minute. I did not feel sick, but more as if under the effects of an intoxicating drink. By this time I felt a burning sensation in the throat, and mentioned it to my colleague, Mr. Dohme, who recommended me to take several drachms of bitartrate of potassa with water, which did me considerable service; I now felt in the highest degree nervous; my legs were hardly able to support my body, and I had a strong inclination to sleep and therefore hurried to my bed, which I entered without undressing.

I now began to feel the characteristic effect of the "Haschisch!" I was not able to go to sleep, yet under a peculiar nervous action of the brain and senses; my mind wandered from one subject to another; and,

strange to say, with my open eyes I dreamed (I must call it so) for, I saw, heard, and noticed everything around me, but the mind wandered rapidly from one object to another, only remaining for a mement or two at one thing, then passed to another, and tales of youth again charmed my existence; pictures and scenes long since forgotten were again for an instant as plain as if seen only a day before. These dreams of imagination lasted about an hour, and then changed to a slight headache, which I felt till late in the night. I now got up to finish some preparation I had commenced in the morning, but found myself too weak and nervous, and had to leave the laboratory. At six I took supper, and had an excellent appetite, but my mouth was still very dry. At twelve o'clock I went to bed, slept very quietly without dreams, and awaked in the morning as well as usual.

HOMŒOPATHIC MEDICAL SOCIETY OF CAYUGA COUNTY, N. Y.

The Homœopathic Medical Society of the county of Cayuga met at the office of Robinson & Boyce in the city of Auburn, March 8th, 1864.

The minutes of the last meeting were read and approved.

A communication from B. Fincke, M. D., of Brooklyn, received and read, together with an article on Hydrocele and its treatment. Two cases were detailed with their treatment by very high dilutions of a satisfactory character.

A paper entitled "Remarks on Aloes, by Carrol Dunham, M. D.," of New York, was read, which gave the views of the writer on the use of that medicine, together with several cases of disease cured by it. It is hoped that these articles may be printed with the consent of the authors, so as to be brought to the notice of the members of the profession elsewhere.

T. N. Caulkins, M. D., read an address on his experience in the service of the United States, which by a unanimous vote was requested for publication, and a vote of thanks for the same was passed.

Carrol Dunham, M. D., Bernard Fincke, M. D., and T. N. Caulkins, M. D., were elected Honorary members of the Society.

A paper was read by H. B. Fellows, M. D., from the committee on new remedies, which urged the members to prove the new medicines. Dr. Fellows was appointed a committee to correspond with the members of the Bureau of Materia Medica of the Homœopathic Medical Society of the State of New York, to urge them to select some medicine for general proving.

H. Robinson, M. D., gave in detail a case of Ascites, which was cured by Ars. 800, in

the early part of his experience of Homœopathy.

H. Robinson, Jr., M.D., reported progress in regard to his paper on Kali Hyd. in throat diseases, and asked for further time, which was granted.

C. W. Boyce, M.D., read an article on Uterine Catarrh, giving the symptoms and treatment. Two interesting cases were detailed, which were cured by a single remedy.

Dr. M. Gwyn was admitted a member of the Society and appointed a committee on "Dose" in medicine, with instruction to report at the meeting in June.

Dr. Caulkin, in his address, reported that in Diphtheria in the army he was in the habit of using chloroform with success. A discussion arose on this point, and several cases were related where this remedy produced decided results both on the healthy and diseased systems. It was asserted that the remedy under consideration had in one case where it was freely used produced extensive inflammation of the mouth and throat. A case was related where a child had serious disease of the throat which it was feared would prove fatal. Chloroform removed all danger in a few hours. These cases both happened in Auburn.

After a general discussion of the science of Medicine, which was entirely social, the Society adjourned to meet on the second Tuesday of June, 1864.

C. W. Boyce, Secretary.

ORGANS OF RESPIRATION.

Description of a Laryngoscope.

BY FRANCIS MASON, ESQ., ASSISTANT SURGEON TO KING'S COLLEGE HOSPITAL.

The laryngoscope is becoming so generally adopted by the profession, that no doubt can exist of its value as an important aid in the diagnosis, and consequently, in the treatment of disease. Notwithstanding what has been written regarding the examination of the vocal cords, epiglottis, and other appendages of the larynx, we have been scantily supplied with descriptions of the various instruments employed, and of the mode of their application.

The laryngoscope being, as its name implies, an arrangement for "looking at the larynx," the simplest apparatus by which this end may be attained is that which will be most readily received by all observers.

The instrument was made for me by Matthews, of Portugal street. It is, in most respects, similar to that described by Dr. George Johnson elsewhere, and which he has done me the favor of showing me. The essential point of difference, however, is that the mirror, instead of working at a hook bent at an angle, is attached to the

forehead-pad by means of a ball and socket-joint. The universal movement thus afforded enables the surgeon to direct the rays of light with the greatest accuracy, and, by allowing him to assume a posture most easy to himself, to make a prolonged examination without fatigue.

The apparatus consists of a slightly concave mirror, three inches and a half in diameter, having no central aperture. To the centre of the back of this is attached an accurately fitting ball and socket-joint, provided with a screw to tighten the joint, should this prove necessary. A stem, continued from the ball in front, is fixed to the forehead-pad, and from the extremities of the forehead-pad is fastened an elastic band, which encircles the head. Three or four laryngeal mirrors, varying in size, and set at a proper angle, complete the instrument. Each mirror fits the handle.

The mode of examining the vocal cords is, in most cases, simple enough, and may be thus briefly described. The patient being seated on a firm chair, a lamp, giving a brilliant and steady light, is placed on one side of, and a little behind him. The surgeon, sitting opposite, fixes the mirror on the centre of his own forehead, and desiring the patient to advance his head slightly, directs the rays of light through the mouth to the back of the pharynx. The laryngeal mirror, having been previously warmed to prevent its becoming steamed by the breath, is now passed rapidly over the tongue, and made gently to elevate the soft palate. It should be borne in mind that the objects, as seen in the mirror, are reversed backwards. The base of the tongue, perhaps, will be first observed; next will be seen the epiglottis; and then, with careful manipulation, assisted by the patient saying the word, "Ah!" the vocal apparatus may be demonstrated. In some cases it will be necessary to hold the tongue forward with a towel; this proceeding, however, greatly distresses certain patients, the examination of whose throats may be better made, either by depressing the tongue with a common spatula, or by requesting them to retract and bury this organ, so to speak, in the floor of the mouth. Should the sunlight be employed to illumine the larynx, the laryngeal mirror will, of course, be the only instrument required.

Thanks to the labors of Dr. Gibb, much has already been done in this country to prove the value of the laryngoscope in the investigation of the physiological as well as the pathological condition of the air passages, and much more remains yet to be accomplished. By moderate practice, however, any one may make himself familiar with the instrument, and by properly directed treatment in disease, alleviate much

suffering and annoyance, which may have lasted for months, or even for years.—*Lancet*.

PERTUSSIS.

BY ASA S. COUCH, M. D.

In the April number of the *OBSERVER*, you request Homœopathic physicians to report their experience in the treatment of *Pertussis*.

The remedies that I have found the most beneficial, in the largest number of cases, are *Cuprum met.* and *Drosera*. I never employ them lower than the 200th attenuation, and rarely exhibit more than two doses a day. Pertussis is a disease to be guided and mitigated, not *cured*. Hence, as a general rule, the higher attenuations should be employed, and the doses repeated at comparatively long intervals. It is to be feared that a disregard of this rule has been too frequently followed by aggravations, and consequent disgust at the result.

POPULUS CANDIDANS.—Dr. Thatcher F. Conant says that he has used an ointment made from *Populus Candicans* with great advantage in cases of hemorrhoids. (An alcoholic extract can be made of the green buds, and this added to oil, &c., to form a cerate.) He never fails to give relief with this application and save many sleepless nights. For the attendant constipation, *Nux* 2nd or 3rd at night, and *Podophyllum* 2nd in the morning.

[We think that Dr. Conant's cure is not equal to the efficacy of *Æsculus*.—Ed.]

POPULUS BALSAMIFERA contains a resinous juice, esteemed in Allopathic practice as anti-scorbutic and diuretic. In France, an ointment from the buds is applied to ulcers and tumors. Dr. John Niez says that it is highly antiseptic and sanative, of a more healing influence than any of the *carbons*. It is frequently used in healing salves or ointments. I have known it to heal the most obstinate inflamed *ulcerous breasts*, *salt rheum* and *running sores*, by mixing one-tenth part of strong tincture, or of the oil-pods, with suet or fresh June butter, frying in a pan, then strained or filtered through a cloth, and applied thin. Dr. D. Shell says it is an infallible cure for the itch, by applying the tincture internally and externally.

[We would rather recommend that the different species of *Populus* should be proved, than favor their empirical use in ointments, &c.—Ed.]

MICHIGAN HOMŒOPATHIC INSTITUTE.

The Association will meet on Wednesday, June 8th, 1864, at 10 A. M., in the basement room of Christian Church, corner of Beaubien and Jefferson avenue, Detroit.

The following Special Committees are expected to report :

On Publication—Drs. E. A. Lodge, P. H. Hale, G. T. Rand and I. N. Eldridge.

On Professorship in State University—Drs. D. W. Rogers, N. B. Covert, and Wm. Huntington.

On Homœopathic College—Drs. C. J. Hempel, J. M. Long and E. A. Lodge.

On Prorings—Drs. E. M. Hale, C. A. Williams, and L. M. Jones.

On Pathology—Drs. E. H. Drake, A. H. Botsford and F. Finster.

On Hygiene—Drs. E. A. Lodge, A. W. Walker and Isaac Douglas.

On Surgery—Drs. E. R. Ellis, A. J. Sawyer, E. H. Drake and Smith Rogers.

On Obstetrics—Drs. A. Walker, A. Bagley, S. W. Pattison and John Doy.

On Medical Electricity—Drs. Joseph Sill, E. L. Roberts and J. A. Albertson.

On Silphium laciniatum—Drs. C. A. Jeffries, J. B. Tuttle and H. C. Bagg.

On Nitrate Uranium—Drs. H. T. Hawley, S. P. Marvin and Lewis Taylor.

On Dose—Drs. C. J. Hempel, J. R. Hyde, I. D. Craig and John E. Smith.

On New Remedies—Drs. A. R. Ball, Orrin Fowle and S. N. Coons.

On Epidemics—Drs. A. H. Botsford, C. J. Covey, John Doy and A. Farnsworth.

At last meeting it was

Resolved, That the Secretary be authorized to receive new members at any time upon the conditions of the Constitution and By-Laws, and that he send a cordial invitation to all the Homœopathic Physicians of this State, who are not now members, to unite with the organization, and that such new members shall have the privilege of reporting at the next meeting, upon any subject connected with medical science that they may select.

The Annual Address will be delivered by A. Bagley, M. D.

Homœopathic physicians of Michigan, adjoining States and Canada, are cordially invited to attend. We expect a pleasant and profitable meeting.

EDWIN A. LODGE, Secretary.

Homoeopathic Observer.

"Similia, Similibus, Curantur."

"I present you with a Truth long sought for, a principle of eternal nature, I appeal to existing facts alone to convince you; and when a conscientious and complete course of study shall crown your researches with success, then, as I have done, bless Providence for the immense benefaction he has allowed to descend upon the earth through my humble agency, for I have been but a feeble instrument of the Omnipotence, before which we all bow in humility."

HAHNEMANN.

VOL. I.]

DETROIT, JUNE, 1864.

[No. 6]

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thony, of Princeton; Joseph Scofield, of Woodfall; D. A. Cheever, of Pekin; S. M. Pratt, of Dover; J. T. Temple, E. C. Franklin, and Wm. T. Helmuth, of St. Louis, Mo.; L. E. Ober, of La Crosse; C. F. Reed, of Kenosha; J. S. Douglas, of Milwaukee, Wis.; C. J. Hempel, of Grand Rapids, Mich.

THE TREATMENT OF FRACTURES.

Dr. S. R. Beckwith, Professor of Surgery in the Cleveland Homœopathic College, made a verbal report upon the treatment of fractures. He stated that he had, for the last ten years, paid much attention to this subject. It was well known, he said, that for the first few days no change could take place in the fractured bone, and he was therefore opposed to the old plan of using tight dressings at once. He thought it best to make a slight extension of the limb for the first twenty-four hours, and to use cool appliances for five, seven, or ten days, according to the age of the patient. By this plan he thought that inflammation and sloughing would be prevented. He gave it as his opinion that permanent dressings should not be used till after these periods.

As a further security against inflammation during these periods, he applied lotions of arnica, aconite, and cold water, giving the same internally. He contended that one of the greatest improvements in modern surgery was in doing away with the permanent bandages for the first five, seven, or ten days; and he deprecated the use of the double inclined plane, and advised the use of the straight splints in all cases. He entered into an elaborate description of the mechanical appliances which he had adopted in the treatment of fractures, and claimed for his peculiar and novel method greater success than could be obtained in any other way. In referring to the subject of union of fractures, he said that in some cases it was almost impossible for a union of the fracture to occur. This was not the fault of the surgeon, but was entirely owing to the condition of the patient. Internal reme-

Societies & Dispensaries.

WESTERN INSTITUTE OF HOMŒOPATHY.

SECOND ANNUAL MEETING.

The Second Annual Meeting of the Western Institute of Homœopathy, composed of delegates from the western and north-western States, was held May 19th, at Chicago.

The Convention was called to order at half-past 10 o'clock by the President, C. J. Hempel, M. D.

ROLL OF MEMBERS.

Drs. Ulrich Mohr, D. A. Colton, E. M. Hale, D. S. Smith, G. D. Beebe, N. F. Cooke, R. Ludlam, Chicago; Wm. C. An-

dies, particularly phosphate of lime and silicia, he had found valuable agents in getting the patient into a proper condition favorable to such union. The usual plan was to rub the ends of the fractured bones together. This was not always successful. The plan he had adopted was to cut down upon the bones and fasten the ends together with silver sutures, the object being to get up inflammation which was not present, or was inefficient. He then gave detailed plans of treatment of various other forms of fractures.

Dr. Ludlam stated that real inflammation was not necessary to a union of fractures. There was such a thing, he said, as physiological *injection*, which was a normal state necessary to the formation of a healthy plasma. This was to be distinguished from the pathological state which they called *congestion*, but the term *congestion* should not be applied to a normal physiological injection.

Upon motion of Dr. Beebe, Dr. Beckwith was requested to reduce his report to writing and hand it to the Secretary for publication.

ADMISSION OF DELEGATES FROM OHIO.

Dr. J. Bosler and Dr. W. Webster, delegates from the county and city societies of Dayton, Ohio, were invited to take seats in the Convention and participate in the proceedings.

NEW MEMBERS.

Dr. Beebe, from the Board of Censors, reported that the following gentlemen had been approved of by the Board, and had paid the initiation fee. He requested that they be elected members of the Institute, which was unanimously agreed to: Drs. S. R. Beckwith, E. C. Franklin, W. C. Barker, J. D. Craig, C. A. Jager, Wm. H. Burt, A. Kendrick, E. J. Fraser, J. Bosler, W. Webster, E. R. Payne, P. H. Worley, S. N. Coons, F. H. Van Lieu, E. J. Painter, and A. E. Small.

It being stated that there were present a number of medical gentlemen from the Eastern States and Canada, on motion of Dr. Beebe they were all invited to take seats in the Convention and participate in its proceedings.

ARTICULAR RESECTIONS.

Dr. Franklin was then called upon, and delivered an address upon the subject of Articular Resections following gun-shot wounds.

He said that the first case of articular resection, noted in the history of surgery, was performed by Dr. Filkins in 1762, in Norwich, England, and at the time the case attracted a great deal of attention. A few years after, Mr. Parks, a surgeon of Liver-

pool, repeated the operation, and it was met by opposition from and denunciation by those members of the profession who always oppose any new innovation in the art of medicine and surgery. At a later period several surgeons performed similar operations, some of them of a bold and formidable character. Even as far back as the time of Hippocrates, he said it would not be difficult to prove that resection of bones was practiced. This method of operating, however, had not been firmly established until the time of Liston and Syme. At the present day, the success which had attended the operation of resection had been so general, that it was now being adopted by the best surgeons. He next proceeded to refer to the subject of resection from gun-shot wounds, and said, after some experience in the army, he had come to the conclusion that gun-shot wounds were only formidable in ratio to the amount of injury done to the large articulations. The most dangerous wounds of the extremities were those of the hip, knee and elbow joints, as the smallest punctures made in those joints often proved fatal. Even slight wounds in the larger joints were often fatal. *Tetanus*, he said, often followed injuries of the ginglymoid joints; but rarely, if ever, from injuries to the ball and socket joints. He argued that there should be a difference between the treatment of gun-shot wounds in the upper and lower extremities. He thought that in the upper extremities, as a general rule, resection would be proper, while in the lower, amputation should be resorted to.

Dr. Franklin then presented several drawings of an interesting character, illustrating cases of resections of joints. Primary resections of the hip joints, he said, were rarely successful, and only a few recorded when operated upon secondarily. Open wounds of the knee joints were more favorable than when closed. Shell wounds, when the joints were laid open, are more apt to heal than when made by a minie ball. He said that it was good practice to make free incisions into the knee, to convert a closed into an open wound. He did not think resection of the knee joints advisable for gun-shot wounds, as it had generally proved fatal. Amputation was the better mode of procedure in the lower extremities, as an artificial limb was better than a limb after resection. He admitted that the surgeon should try and save the limb if possible, and only resort to amputation when necessary to the welfare of the patient. In resections of the joints of the foot, he said, the rule should be to save as much of the foot as possible. He gave it as his opinion that gun-shot wounds of the clavicle often demanded resection.

He then told of a remarkable case related

by Baron Larrey, where a cannon ball passed near the shoulder, and the cuticle was scarcely discolored, yet the head of the humerus and clavicle was so shattered that resection had to be resorted to to save life. The patient recovered. Larrey performed this operation nine times, and with four deaths.

Dr. Franklin said that he had performed eleven resections of the shoulder-joint with only two deaths. This operation, he contended, should be performed as quickly as possible after the injury had occurred. He then laid down some important rules to be followed as necessary to success in the operation of resection. The incisions for exposing the joint, he said, should be made in the direction opposite to the main blood-vessels and nerves, to avoid injury to the vital parts. The incisions should be free, giving sufficient room for manipulation and for turning out the heads of bones. If it were possible, the incision should be made in the line of the wound, terminating so as to permit a continued drain from the joint. The next object was to remove as much of the *synovial membrane* as possible, taking care to preserve all *periosteum*, as the one led to inflammation, while the other led to the reproduction of bone. He gave his unqualified recommendation in favor of the use of *calendula* tincture to suppurating surfaces, and contended that Dr. Temple of St. Louis was entitled to the thanks of the profession for its introduction. In conclusion, Dr. Franklin declared that his successful treatment of surgical cases was due to the use of remedies upon the homœopathic law of *similia similibus curantur*.

A vote of thanks was then given to Dr. Franklin for his elaborate and able paper, which he was requested to hand to the Secretary for publication.

The Society then adjourned till 3 o'clock.

AFTERNOON SESSION.

The Convention re-assembled at 3 o'clock. The President in the chair.

Upon motion of Dr. Ludlam, it was resolved that three-quarters of an hour be devoted to the discussion of each of the reports that might be submitted to the Society.

DRUG PROVINGS.

A report upon the proving of drugs was read by Dr. J. S. Douglas, of Milwaukee, Chairman of the Committee on Drug Provings.

The concluding portion of the report recommended that it be made the imperative duty of every member of the Institute to prove some drug, and submit their report to the Committee at their next Annual Meeting.

After considerable discussion, the follow-

ing resolution was adopted instead of the recommendation in the report:

Resolved, That the members of this Institute be requested to engage in the proving of drugs upon themselves and their friends; and that the Bureau of Provings be directed to select and provide medicines and circulars defining the manner of proving and recording the symptoms, which shall be forwarded to all members who may signify their desire to contribute in this manner to the demands of science, and report the same to the Chairman of the Bureau by the 1st of April next, to be by them presented to the public, or rejected, as they shall see fit.

HOMŒOPATHY.

The report of the Committee on Homœopathy was presented by the chairman, Dr. E. M. Hale.

The report was confined principally to the condition of the *therapeutic* doctrines of Homœopathy at the present time.

He said that the law of *similia similibus curantur* had been and must be the great therapeutic law of homœopathy. There could be no other law of cure, and it would be surprising if that law could not be extended so as to meet the demands which were made upon it, by the discoveries in physiology, pathology, and kindred sciences. It was now established that nearly all diseases have actual pathological states, that is, abnormal conditions characterized by structural alterations. He contended that a *materia medica*, founded upon physiology and pathology, as well as symptomatology, would be one of the grandest movements of the age. The *materia medica* handed down to them by Hahnemann and his colleagues was a great and an invaluable work, and those who have adopted it will never fall back into the barren sophistries and vague insanities of the old school. He went on to remark that they might rightly claim that their power over disease was greatly superior to that of the dominant school, by virtue of their pathogenetic knowledge of drugs. If it was now so superior, how much more successful would it become when it was fixed upon the more scientific basis of pathology. The present tendency, however, of the homœopathic school was to a more thorough proving of medicines.

Next in importance to the law of cure was the discovery of Hahnemann, relating to the influence of trituration and succession, in developing the curative power of drugs. Hahnemann taught that these processes liberated the dynamic principle existing in all remedial agents; that the dynamic power was the true curative power.

Dr. Hale believed in the atomic power of drugs up to a certain point. In each drug

the atoms being of a different form produced different effects upon the human organism. If crude drugs, when taken into the stomach, were separated or disintegrated, and the curative forces liberated, how much more scientific was it to liberate those forces by pharmaceutical art, than to oblige the digestive organs to do the work. By this means they get a better and prompter action from remedies. He then adverted to the subject of Dose, and said it must be admitted that some law must be discovered which would be a guide to the selection of the proper dose or amount of medicine to be given in certain diseases. Whether this law would be evolved out of the facts of pathogenesis, and based upon the primary and secondary action of drugs, could not be yet decided. It was the opinion of the Committee that no exclusive potency could be selected for general use in the treatment of disease. The whole range of potencies, from the highest, was useful in general practice. Regarding the administration of medicines, he said, it was the most scientific manner to give a single medicine at a time. He discountenanced the alternating of medicines, as a general practice, and asserted that mixed medicines, except in some instances, should never be made, as such a practice would lead back into the uncertainties of old school medication.

Dr. Hale concluded his interesting paper as follows:

Your Committee consider that they have every reason to congratulate the members of the Institute on the present condition of homœopathy in this country, and particularly in the West. Our system has kept even growth with the growth of the flourishing cities of which Chicago is the type. It keeps pace with the intellectual development of the populations of the Western States. Wherever a community is noted for its intellectual culture, its educational advantages, and its popular refinement, there you will find homœopathy is adopted and appreciated. This is one of the great truths of the age, and we confidently call upon our opponents to prove to the contrary, well knowing they dare not attempt it.

The future of homœopathy will be, in every respect, grand and triumphant, if its adherents work diligently and honestly for its elevation and progression. The fate of the system, he said, was in their own hands. He was confident that no homœopathic physician would do aught to discredit a system of medicine, which has in it the elements of so much that is capable of elevating the physical condition of the human race.

The report was received with applause, and ordered to be printed.

DIPHTHERIA.

Dr. G. D. Beebe, as Chairman of the Committee on Surgery, called attention to the large number of cases of diphtheria wherein the patients died, not so much from the virulence of the disease, as from suffocation by reason of the false membrane being located at and obstructing the glottis. From the confidence he had in the remedies indicated, he was satisfied that if time could have been gained for the action of remedies, these cases might have been saved. He reported two cases in which he had operated, one of which proved fatal, in consequence of the tube not being kept open by the nurse, and the other resulted in perfect recovery, though at the time of operating the patient was to all appearances dead from suffocation. In this latter case the silver tube had been inserted into the trachea, or windpipe, just at the upper margin of the sternum, and allowed to remain in that position for two days, when the disease had so far abated as to allow the patient to breathe without the tube. It was then removed, and the opening closed by quill sutures. In a few days the patient had entirely recovered.

Dr. Beebe was requested to put his remarks in writing and hand them to the Secretary for publication.

THE PROCESS OF EMBALMING BODIES.

Dr. Wm. T. Helmuth, of St. Louis, Chairman of the Committee on Anatomy, read to the members of the Institute a minutely-prepared paper, explaining the process of embalming the dead body, for the use of the medical student, or for the satisfaction of friends who are desirous of obtaining the bodies of the dead, fallen in battle. He said the subject was now attracting much attention, and was of great interest to the profession.

The report was ordered to be published.

HOMŒOPATHY IN THE ARMY.

Dr. Franklin gave notice that during to-day's session he would introduce a resolution having for its object the introduction and legalization of homœopathy in the army of the United States.

INVITATION TO ATTEND A BANQUET.

The President informed the members of the Institute that they were invited to a banquet at the Sherman House, at half-past 9 in the evening, given by the resident homœopathic physicians of Chicago.

The Convention then adjourned to meet at 10 o'clock, May 20th.

In the evening the members of the Institute, accompanied by their wives, and several friends, assembled in one of the parlors of the Sherman House, where an hour was

most agreeably spent in social conversation.

SECOND DAY'S PROCEEDINGS.

The second day's session commenced at half-past 10 o'clock, Dr. J. T. Temple, of St. Louis, in the chair.

CHIEFS OF BUREAUS.

Dr. R. Ludlam, from the Committee on Nominations, reported the following gentlemen as Chiefs of Bureaus, to report upon the following subjects:

Orthopædic Surgery—S. R. Beckwith, M.D., of Cleveland, O.

Plastic Surgery—E. C. Franklin, M.D., of St. Louis, Mo.

Treatment of Dislocations—G. D. Beebe, M.D., of Chicago.

Pathology and Treatment of Spotted Fever—L. C. Belding, M.D.; A. O. Blair, M.D.

Typhoid Fever—G. W. Bowen, M.D.

Skin Diseases—N. F. Cooke, M.D.

Diphtheria—J. S. P. Lord, M.D.

Cancer—D. A. Cheever, M.D.

Prolapsus and Retroversion—L. Pratt, M.D.

Hysteria—J. Webster, M.D.

Ramollissement—L. E. Ober, M.D.

Contingencies of Labor—R. Ludlam, M.D.

The report was accepted and adopted.

Dr. L. Pratt, from the Committee on Business Programme, reported the following order of business for the next session of the Institute:

Prayer, call of roll, reading of minutes, applications for membership, election of members, reports of Committees, unfinished and new business, miscellaneous business, Treasurer's report, election of officers, appointment of Committees, selection of locality for the next Annual Meeting of the Institute.

The report was concurred in.

The Treasurer's report was received and approved. The amount received during the past year, as exhibited by the report, was \$110, and the sum paid out for printing was \$90, leaving \$20 in the hands of the Treasurer. This report did not include any portion of the money received at the present session.

It was resolved that the next Annual Meeting be held at St. Louis, commencing on the third Thursday in May, 1865.

CLINICAL MEDICINE AND PATHOLOGY.

Dr. J. T. Temple, of St. Louis, Chairman of the Bureau of Clinical Medicine and Pathology, read an interesting report upon the subject. After entering into a lengthy discourse relative to the origin and history of homœopathy, Dr. Temple said that he, with the Committee, had come to the following conclusions: That, in the first place, an accurate knowledge of the functions of every organ of the body and the tissues, in a state

of health, was essential to a correct appreciation of their alteration by morbid forces, or disease. In the second place, that they had shown pathological alterations of structure to be merely objective symptoms, lying below the surface. Pathology must therefore be taken into account in estimating the whole symptoms, for the purpose of securing an effectual remedy.

He went on to contend that disease was no other than the organism in the act of throwing from the system that which interfered with its physiological integrity. Homœopathy, he contended, could go hand in hand with physiological medicine—hygiene, in all its health-giving forms. These two together could look blue cholera in the face, bid defiance to fever, stand without a care beside the bed of the Egyptian disease—diphtheria, and almost laugh to scorn all its prognosticated sequela. He went on to remark that materia medica was one of the columns that sustained the dome of the great doctrine of homœopathy, and its power was such that an error could never prevail against it. Therapeutics was the system which was the demonstration of the medicine and the disease. The principle of *similia* constituted the very corner-stone of homœopathy—the lever of all therapeutic power. The principle was a universal one; it extended to everything, and applied to everything in physical, mathematical, mechanical, and natural science; to religion, politics and literature. In the examination of patients, he advised all to look calmly, think deeply, and to gather every symptom, whether physiological, pathological, or of any other character which might be requisite to form a complete symptomatic picture. After this, guided by the polar star—"Similia," their course would be plain, though the voyage might be difficult. In conclusion, he urged upon them the duty and responsibility of the members of the Institute. It was their duty to cherish with warmest affection the memory of their great master, and to guard with jealous care the unsullied name of the father of homœopathy. Their responsibility consisted in the war of truth against error, false teaching, false doctrine, and fatal practice. He called on them to stand shoulder to shoulder, bearing aloft the flag of *Similia*, charging the enemy with the bayonets of therapeutic truth, until the shout of victory shall resound throughout the land, and suffering humanity be released from the torture and barbarism of allopathy and all its allies.

The report was well received, and ordered to be published.

Adjourned.

AFTERNOON SESSION.

At 3 o'clock in the afternoon the Soc

re-assembled, Dr. J. M. Douglas temporary President.

Dr. Beebe, from the Board of Censors, reported the names of Drs. C. A. Wilbur, of Chicago, and George E. Hall, as members of the Institute.

EXCLUSION OF HOMOEOPATHIC PHYSICIANS FROM THE ARMY.

Dr. R. Ludlam read the following resolutions, which had been adopted by the Miami Homoeopathic Medical Association, and which were sent to the Institute to be read:

Whereas, The exclusion of homoeopathic physicians from the army and navy of the United States being illegal and unjust, and thus violating every principle of humanity, by forcing a system of medical practice upon those who utterly discard and refuse the same when at home, and thereby preventing a large class of intelligent, competent surgeons from engaging in this important department of practice; and

Whereas, Our friends at home and in the army and navy are feeling indignant at the injustice of such an illegal arrangement, we, the members of the Miami Homoeopathic Medical Association, do present to the Western Institute of Homoeopathy the following resolutions expressing the sentiments and feelings of the homoeopathic physicians of this great valley;

Resolved, That the homoeopathic physicians of the United States do, in a body, join in loud and solemn protest against the continuation of such injustice; and that we in a suitable document appeal to the proper authorities that we be granted a due proportion of the medical and surgical practice in the army and navy of the United States, during the present war, and for all time to come.

Resolved, That we deem this just to our friends, who are exposing themselves to extreme dangers, and who will call us to an account for our apparent silence, unless we act with energy, perseverance, and power.

Dr. Franklin, of St. Louis, said that he was glad to see this matter brought up. He had prepared a series of resolutions to present to the Institute, and he would now offer the following:

In view of the comparatively superior benefits to suffering humanity that follow the introduction of the homoeopathic system of medicine wherever it has been practiced, and

Whereas, The brave defenders of our common nationality demand of the Government all the means and appliance that the most enlightened and progressive medical practice can bestow, in consideration for the risk to health and limb that is cheerfully yielded for the preservation and perpetuation of our national existence, therefore,

Be it resolved, That the Western Institute of Homoeopathy does hereby pledge itself to use all due diligence and effort to secure to the army and navy of the United States the introduction and legalization of this beneficent system of practice.

The passage of this resolution was strenuously urged by Drs. Franklin, Long, Pratt, Douglas, Belding, Hale, Small, and others, who were very earnest in their denunciation of the allopathic physicians, and the policy of the administration that shuts homoeopathic physicians out from the army and navy.

Dr. Beebe offered a substitute, which was afterwards withdrawn.

Dr. Franklin moved that a Committee of three, members of the Institute, be chosen to take general charge of this matter; and that the Committee have power to appoint Sub-Committees in every State, city, and town throughout the country.

The motion was unanimously carried, and Drs. E. C. Franklin, of St. Louis, G. D. Beebe, of Chicago, and B. S. Beckwith, of Cleveland, were chosen as such Committee.

ELECTION OF OFFICERS.

The Society then proceeded to the election of officers for the current year, which resulted as follows:

President—Dr. J. T. Temple.

First Vice President—Dr. A. E. Small.

Second Vice President—Dr. J. S. Douglas.

Recording Secretary—Dr. Wm. T. Helmuth.

Corresponding Secretary—Dr. E. M. Hale.

Treasurer—Dr. L. Pratt.

Board of Censors—Drs. R. S. Smith, G. D. Beebe, N. F. Cooke, E. C. Franklin, and D. A. Cheever.

The Chairman announced the following Bureaus on the collateral sciences:

Homoeopathy—Drs. A. E. Small, G. E. Hall, and L. E. Ober.

Drug Proving—Drs. J. S. Douglas, W. H. Burt, and T. J. Patchin.

Surgery—Drs. E. C. Franklin, G. D. Beebe, and B. S. Beckwith.

Anatomy—Drs. D. A. Colton, W. T. Helmuth, and D. W. Rogers.

Physiology—Drs. C. F. Reed, — Lord, and E. M. P. Ludlam.

Obstetrics—Drs. R. Ludlam, S. P. Cobb, and N. F. Cooke.

Chemistry—Drs. D. M. Brown, A. O. Blair, and E. M. McAfee.

Clinical Medicine and Pathology—Drs. N. E. Cooke, P. H. Hale, and S. Rogers.

LACHEMIS IN BRONCHIAL CATARRH.

Dr. C. W. Boyce, of Auburn, N. Y., submitted an interesting paper upon the Lachemis in bronchial catarrh, which had met the warm approval of many of the members, and it was referred to the Publishing Committee.

Dr. D. W. Rogers received the thanks of the members for the exhibition of a device for administering alcoholic vapor to persons afflicted with rheumatism.

Upon motion of Dr. D. A. Cheever, the Secretary was instructed to procure certificates of membership for the members of the Institute, and also to procure a seal for the Society.

Dr. R. Ludlam moved that the thanks of the members of the Institute be tendered to the press of Chicago, for the very perfect reports which they had published of the proceedings of the Society. Carried unanimously.

The Society then adjourned, to meet at St. Louis on the third Thursday of May, 1865.

HOMŒOPATHIC MEDICAL SOCIETY OF THE STATE OF NEW YORK.

The thirteenth annual meeting of this Society was held at the City Hall, in Albany, on Tuesday, May 10, 1864.

From circular of Drs. E. D. Jones, L. M. Pratt and H. M. Paine, executive committee, we extract the following items :

"The transactions of the Society represent the annual status of the Homœopathic school in the State of New York.

"The MS. copy of the report for 1864 is now in the hands of the printer. It will contain fifty-two articles, of which about thirty relate strictly to medical science, eight are historical, three have especial reference to the introduction of the Homœopathic system of practice into the army, nine are reports and proceedings of County Medical Societies. There are also tables and papers relating to the County and State organisations of very great value to the profession.

"In order to maintain our present standing, and make still greater attainments in all the departments of medical science, the ablest practitioners of our school should attend the meetings of the Society, and report the results of their studies and experience for publication in the Transactions. Let the profession keep this fact constantly in view, and be prepared to report at every regular meeting of the Society, either individually or through their respective county organizations, all papers that are worthy of preservation.

"If every Homœopathic physician in this State would annually furnish the history of *a single clinical case*, Homœopathically treated, and *a single drug proving*, the report would become a valuable contribution to medical science, and increasingly useful to the profession. The secretary will arrange and classify all such communications, however fragmentary, and prepare them for publication."

BOND STREET HOMŒOPATHIC DISPENSARY' NEW YORK.—The ninth annual report shows that 14,195 were treated during the year ending Feb. 1, 1864. The institution was founded by Dr. Fullgraff. The attending physicians are Drs. Fullgraff, Andrews, Danne, Taylor, Ermentraut, Thompson and Woodward.

NEW YORK HOMŒOPATHIC DISPENSARY.—Patients attended in 1863, 7,257. Attending physicians: Drs. Lilienthal, J. A. Ward, S. Caro, Hitchcock, Bradford.

Probing.

GELSEMINUM NITIDUM.

BY C. NEIDHARD, M. D.

The following symptoms are taken from the Essay of Dr. JOSHUA STONE, of *Westfield, New York*. He proved the Gelseminum at my request, and made it the subject of his inaugural thesis.

The prover, Joshua Stone, is twenty-seven years of age. Has black hair and light complexion. He is strictly temperate in his habits of life—using no intoxicating drinks of any kind, no coffee, tea, or tobacco. He is subject to occasional attacks of indigestion, and suffers much from cold hands and feet. Otherwise he enjoys very good health. I will give his provings in his own words :

On the 21st of November, at 10 o'clock, P. M., I took six drops of the mother tincture in water, made from the flowers of the yellow Jasmin.

Nov. 22. During the last night was quite restless, and much annoyed with unpleasant dreams. During the day, distracting pain in occipital region, much aggravated by movement, especially on bending the head downward. This pain was much increased towards evening.

Nov. 23. Experienced dull pain in the head and extremities. At 10 o'clock, P. M., took ten drops of tincture.

Nov. 25, 26, 27, 28, no symptoms.

Nov. 29. Took 50 drops of tincture at 10 P. M.

Nov. 30. During the night was very restless, with unpleasant dreams after midnight.

Dull pain in bowels, which became quite severe towards morning. Pain of a similar character in several of the lower lumbar regions. Dull, heavy pain in region of occiput. Involuntary emission of semen without an erection. Urine much increased in quantity. Ten o'clock, A. M., dull pain in left humeral region, also in lower extremities—these are deep-seated in the muscles. Have felt chilly all day, particularly in the morning.

Dec. 1. Dull, aching pain in back, particularly in lumbar and sacral region, which came on about 3 A. M. Also similar pains (deep-seated) in upper and lower extremities, and joints generally. Yellowish white fur on tongue. Sensation as of something *wanting* in epigastric region. Emission of semen without erection. All the pains are much aggravated by heat of bed, and all much worse *after* midnight. The pains spoken of above continued during the day, but in a much less degree. In evening, eyes felt quite sore, and as if there was some foreign substance irritating the conjunctiva.

Dec. 2. Very restless during the night, especially towards morning. Rheumatic pains in bones and joints of extremities, and in the back, as the night previous. Also, pain in bowels towards morning. Headache of a dull, aching character in occipital region, occasionally extending to the os frontis. At night eyes quite sore; not much pain, but merely soreness with sensitiveness to light and lachrymation. Slight chills during the day.

Dec. 3. Awoke about 3 or 4 A. M. with severe pain in both upper extremities; seemed to be deep-seated in muscles. The pains were most in left *arm* and *fore-arm*, and in *calves* of both legs. General restlessness, with chills in morning after breakfast. Rather dull and stupid for some days, with disinclination to conversation. This was remarked by my friends, who knew nothing of my taking medicine.

Dec. 4. Rheumatic pains in extremities. After breakfast experienced a dull, aching pain in head in region of occiput, which increased in severity as the day advanced. At 10 o'clock, A. M., I went to the Penn Hos-

pital, where I saw a number of severe wounds. I am not usually affected very much by the sight of wounds, but to-day, *that*, or something else, caused some very unpleasant sensations, which were as follows: I became very weak, and my friend remarked that I was very pale, accompanied with slight nausea and trembling of lower extremities. These continued some ten minutes, but disappeared on going into the open air. Headache continued to increase in severity until after dinner, when it was much less severe; but about 4 o'clock the pain again returned, and was more severe than before, and seemed to increase in severity until in the evening, when it became excruciating, accompanied with slight nausea. The pain seemed slightly mitigated by shaking the head, but the relief thus obtained was not marked. I also felt *quite chilly*. Went to bed about 9 o'clock, but the recumbent position did not mitigate the pain at first. I however succeeded in getting sleep from about 10½ to 2½, when I awoke with most intense aching pain in left frontal region, and extending to right occipital region, and occasionally over almost the entire head. This continued about *one hour*, and then left me *entirely*. After which, experienced a dull, aching pain in the umbilical region, which continued until I got up. Deep-seated aching pains in muscles of extremities, relieved by *motion*. After breakfast had a sharp, shooting pain from right shoulder to dorsal vertebra.

Dec. 8. During last night the pains as heretofore in the extremities, which came on mostly *after* midnight. These pains were also continued during the day, but in a much less degree. Some headache as before in the occipital region. Palpitation of muscles of abdomen, which continued about three minutes. Dull pain in lower lumbar and sacral region.

Dec. 9. During night pains in extremities, much as usual, particularly in *fore-arms* and *calves* of *legs*, also in elbow and knee joints. All symptoms of extremities were similar to those experienced as before, but were less severe.

Dec. 10. Early in morning sharp, shooting in last phalangeal joint of right thumb.

Have experienced dull pains in muscles of *right* arm and *shoulder*, and some of the time in left arm and lower extremities.

Dec. 11. Slight pains in extremities during the night. 3 P. M., experienced a sharp, shooting pain in calf of right leg. 6 P. M., sharp pain in *right wrist*. 7 P. M., dull pain in left thigh and under scapula of *left side*. 7½ P. M., severe aching pain *left* elbow. Have experienced *dull* pains of a *shifting* character all day.

Dec. 12. Symptoms of last night were not prominent; some slight pains in muscles of extremities. During the day felt extremely dull and stupid; but little pain in muscles of extremities. Dull pain in head in region of occiput. 9 P. M., pain in right wrist of dull character, with great weakness of the same.

Dec. 13. Pain in wrist less severe, but quite weak.

Dec. 14. No symptoms.

Dec. 15. No symptoms.

Dec. 16. 10 P. M., took 50 drops of tincture.

Dec. 17. During the night *very restless*. During the day tendency to headache on movement, particularly on *going up stairs*.

Dec. 18. Slight pain in left hypochondriac region.

Dec. 20. About 11 A. M., severe aching pain in occipital region for a few moments. Very dull and stupid, with aversion to study.

DR. HENRY'S PROVING.

The following symptoms were obtained by Dr. Henry, of Montgomery, Alabama, and were forwarded to Dr. C. Neidhard.

April 3, I took 30 drops of the tincture. The first symptoms felt were pains over the whole top of the head, extending back to the occiput, with a general dizziness and disagreeable pain in the whole head. Melancholy and desponding mood. Pains of shooting character in the frontal sinus, extending to the eyes and jaws. The pain in the eye is of a pricking character, extending from the bridge of the nose to the eye. Pains deep in the ball of the left eye, extending from above downwards.

Paroxysmal pain in the left lower extremity. Violent shooting pain in the leg, which comes on in paroxysms; every one is more violent. The pain is half way between the knee and ankle. Pain in hip of left side, confining itself to the joint; it at times extends to the outside of the thigh. The pain is of a drawing, sharp character, and much worse on motion. Pain in little finger and the one next it. Pains in left foot and ankle, with spasmodic contraction and drawing pains in the toes. Pains in the neck, which confine themselves to the upper part of the sterno-cleido mastoid muscles directly back of the parotid glands. On the right side pain extends from the last back tooth up to the temple. Short, paroxysmal pain in the superior part of the right lung; on taking a long breath it sticks from above downwards. The pain in the lungs is one of the most prominent symptoms. Rumbling and rolling in the abdomen, with emission of flatus above and below. Periodical pains in the abdomen, with yellow diarrhoea coming on in the evening. Pain in the left iliac region. Bowels loose, but great difficulty to discharge anything. There seems to be great strength in the sphincter muscles. Yellow coat on tongue.

April 5. Took 30 drops of tincture. Experienced pain over the whole top of the head, extending back to the occiput. General dizziness, and disagreeable pain in the head. Melancholy and desponding mood. Pains of a shooting character in the frontal sinus, extending to the eyes and jaw. Pain in the eyes is of a pricking character, extending from the centre to the angle. The pains seem to wind round the right eye. Pain extending from the bridge of the nose to the eye. Deep-seated pain in the eye of left side, extending from above downwards. All these symptoms were felt with more violence than at first. Spasmodic pain, extending from the inner condyle of the right arm to the axilla. Smoky appearance before the eyes, with pain above them. Total blindness ensued in a very short time after taking the 30 drops, with violent dizziness. A band-like pain, which surrounded the head, with shooting pain in each jaw and parietal bone. Pain in left side of head.

extending from the prominence of the parietal bone to the mastoid process of the temporal; it is periodical in its nature. Periodical pains in the pectoral muscles. General symptoms were: Chilly sensations over the entire body, appearing on the same day. Complexion yellow, also the eyes. Complete prostration of the system with emaciation.

Dr. Henry remarks, that the remedy was taken for one week, the dose being gradually increased each day.

PROVING BY MR. BIGELOW.

Mr. Franklin Bigelow, aged 24. Sanguine nervous temperament. Took twenty drops of tincture of *Gelsemium nitidum*. Eight days after taking it experienced sensation of heaviness and oppression of the head. Severe and oppressive pains in the forehead and vertex. Headache very distressing. Gloomy, and indisposed to exertion of any kind. Became tired and greatly exhausted very easily. Headache comes on after dinner, and continues till evening. At the same time excessive drawing, contracting and crampy pains in the lower limbs, extending from the thighs to the toes. The pains seem to proceed from the bones as well as the muscles. Excessive crampy pains in the whole right foot. During, and after a walk, the symptoms are much aggravated. It seems as if the limbs could not be made to move another step. When the pains are felt above the knee, they are not felt below, and *vice versa*. *Excessive drawing and contracting* pains in the gastrocnemius muscle of the left leg. The other pains in the limbs all abate while sitting. This does not. No position seems to relieve it. Drawing and aching pains, which seem to come from bones. Heaviness and feeling of weight in the limbs. But little inclination to sleep. When it does come on, dreams much of business, etc. Eyes much inflamed and weak, with great flow of tears at intervals.

Mr. Bigelow did not record the symptoms at first, as they were so small he did not think them worth noting. He, however, concluded that those above were not to be trifled with, and consequently recorded them:

CLINICAL REMARKS.—A child, aged 10, was cured by *Gelsemium* 1st dil. 2 drops every four hours, of a kind of bilious fever, characterized by the following symptoms: Giddiness, dull, aching pain in the forehead and over the eyes. She cannot concentrate her mind on any one thing; cannot read; is very irritable; very thirsty; and has slight chills, followed by much fever; extreme weakness. Was completely cured within eight days.

Mr. T. S., one of the most celebrated artists in the United States, upwards of eighty years of age, was afflicted for more than four months with a constant involuntary discharge of urine every quarter to half hour, day and night. The disease seemed to consist in a relaxed paralytic condition of the sphincter muscles of the neck of the bladder. It was impossible for him to hold his water. Cantharides, Bromide of Potash, Dulcamara, and some other remedies were prescribed without the slightest beneficial effect. It was now thought best to omit all remedies for several weeks, but without any improvement. Having lately studied the pathogenetic effects of *Gelsemium nitidum*, it was resolved to try it in the above case. Five drops of the 2nd dil. were exhibited three times a day. In a few days its beneficial effects were already perceptible, and in the space of a week the whole disease was conquered, and has not returned within now six months.

DRUG PROVING.

PROPER METHOD OF CONDUCTING—TRANSACTIONS OF THE AMERICAN INSTITUTE.

"We would urge upon all those who undertake to prove any medicine, a careful perusal of Hahnemann's directions as to the manner of making such experiments; they can be found in the *Organon*, in paragraphs 121 to 152, inclusive.

"We consider it desirable that the age, sex, temperament and individual peculiarities of the prover should be mentioned. The name of the medicine, the potency, the dose, the mode of taking it, whether dry, or in water, and the time of day at which it is taken, should be clearly stated.

"It is very important that each symptom be written down carefully, at, or near as possible, to the time, and in the order of its

occurrence ; and the time at which it occurs noted.

"That the location of each symptom be given with precision, and the symptom be described with minuteness in every respect.

"That each symptom, with all its attending circumstances and concomitants, be written in a separate paragraph and numbered, that it may be more easily referred to in studying the character of the medicine and in arranging the symptoms systematically.

"If the prover feels doubtful whether any symptom is the effect of the medicine, he should affix to it a note of interrogation within brackets, thus : [?]

"We would advise, in conclusion, that each prover who makes use of potencies in proving, should make the first trial with high potencies, afterwards, if necessary in his particular case, proceeding to the lower dilutions and triturations, and even taking the crude substance or tincture if satisfactory results are not obtained with the attenuations.

"One member has never been able to elicit any reliable symptoms by means of the middle or higher potencies, unless the organism had been previously saturated with massive doses of the original drug. He admits that in exceptional cases, by organisms endowed with peculiar idiosyncratic susceptibilities to medicinal action, symptoms may be elicited by the higher potencies ; but he considers it unreliable to commence with these potencies."

Practice of Medicine.

AMMONIUM CAUSTICUM IN DIPHTHERIA.

BY F. X. SPRANGER, M. D.

On perusing the pages of the Homœopathic Materia Medica, we find no drug that does so much simulate Diphtheria as Ammonium causticum. It resembles diphtheria, both in its symptoms as well as pathology ; and although its provings are yet very scant, still we can draw a comparison between it and Amm. carb., which is very similar in its action.

According to Noack and Trinks, Ammonia is particularly indicated in diseases that have a tendency to dissolution of the blood, assuming a putrid character, being at the same time accompanied with nervous and venous *erethism*.

Among its *pathogenetic symptoms* we have : General excitement of the circulation ; dry, hot skin, at times profuse perspirations ; high fever ; small, weak and frequent pulse ; pain in the head, as if it were pressed asunder from both sides ; bloody and serous discharge from the nostrils ; deep and feeble voice ; white coating of the tongue ; burning and scratching sensation on the root of the tongue and fauces ; burning and heat and pain descending from the mouth to the stomach, and greatly interfering with respiration ; swollen tonsils, dark red color of the velum, tonsils, and back part of the pharynx ; velum palati is drawn back, and covered with a layer of white mucus ; very difficult deglutition.

Pathological Anatomy : Nasal membrane very much reddened, and covered with albuminous membrane. The whole pharynx is very red, velum palati dry and covered with a mucous layer. Back part of the glottis and entrance to the inner glottis very red, and covered with pseudo-membrane. Trachea and bronchia very much reddened, and here and there covered with membranous layers.

Here we have a pretty close picture of diphtheria. This drug is indicated in common pharyngeal diphtheria, as well as in cases that more particularly involve the trachea or schneiderian membrane. The records show many cases in which it has had also the desired effect.

Among many cases that I have successfully treated with this medicine, I shall mention but one. It was a case of croupous diphtheria ; a servant girl 20 years of age ; corpulent, plethoric constitution. When first called to see her she had a croupous cough, which threatened suffocation every moment. On examination, found the lower part of the pharynx covered with a white pseudo-membrane extending down so far as could be seen. Patient was in the greatest agony, frequently jumping up out of bed and gasping for breath. I dropped 15 drops of Ammonium causticum into a tumblerful of water, one-half-teaspoonful to be given every half hour. Left the patient soon afterwards, about 6 o'clock P. M. (The patient lived in the country). While tak-

the first few doses she nearly strangled, deglutition being so difficult. Soon afterwards she began to get easier. Next morning I found the patient sitting up in bed, breathing freely. Had taken some broth; deglutition was very easy; the pseudo-membrane had entirely disappeared, and the patient was discharged cured the next day afterwards.

I have since then always used the medicine, in less severe cases in teaspoonful doses of a solution of 5 drops of the Ammonium to a tumblerful of water, and given in intervals from 1 to 4 hours.

For the American Homœopathic Observer.

CHIMAPHILLA UMBELLATA.

Its value in a Case of Irritable Bladder.

BY E. M. HALE, M. D., OF CHICAGO.

A married lady, aged 34, had been troubled for many years with prolapsus uteri, leucorrhœa, ulceration of the neck, etc., but who is now somewhat better of those difficulties, applied to me for the relief of an obstinate vesical irritability. Her symptoms were as follows:

Frequent desire to urinate during the day. At night the urging was so constant as to deprive her of nearly all sleep. She had to get up and urinate as often as every hour. The urine was high colored, deposited a copious light-colored sediment (mucous), and there was considerable smarting, burning and pricking pain during its emissions. The quantity of urine voided was not larger than normal. The patient was constipated, an evacuation only every third day. Some tenderness over the hypogastric region. She had a severe, racking, dry cough, but no indication of pulmonary difficulty. The prolapsus was aggravated by the cough.

April 2. Inserted an India rubber inflatable pissary. This relieved the prolapsus, and *stopped the cough altogether*, but the vesical irritation was not alleviated, at the end of five days.

April 6. Gave *Cannabis* 1st (4 pills No. 5, dry,) every four hours. The effect of this remedy was prompt in relieving the irritation and indirectly causing sleep. She de-

clared it acted as a direct *anodyne*. This improvement continued for five days, when the medicine ceased to give any relief, and she grew worse than before.

April 11. Gave *Chimaphilla* 1-10th dilution, 10 drops in a spoonful of water, every four hours. For several days no effect was noticeable, except a *flushing of the cheeks for about twenty minutes after each dose*. On the fourth night, however, she was able to sleep all night, and next day she noticed that the usual copious sediment was notably lessened, and the dysuria and frequent urging rapidly gave way. The bowels began to act regularly; the tenderness of the bladder disappeared, and at this date, April 20th, she is more comfortable than for many months previously.

Several things relating to the action of this remedy are worthy of note.

(1). The pathogenetic symptoms mentioned above.

(2). Its power in relieving dysuria.

(3). Its influence in lessening the sediment (there was an evident *vesical catarrh*).

(4). Its curative action in constipation.

I have treated several cases of *gleet* with the *Chimaphilla* 1-10th, and with gratifying results.

IRIS VERSICOLOR. ✓

BY JAMES KITCHEN, M. D.

My experience with *Iris* confirms all that I mentioned in the paper in the N. A. Journal some years since. I make very great use of the article, and consider it in my practice one of the polychrests. I prescribe it in the following affections:

1. *Sick Stomach*—Either nausea or vomiting, whether simple or bilious, but especially the latter. Also of pregnant women. *Cholera morbus*, *Cholera Asiatica*.

2. *Cramp of Stomach*—A very efficient remedy; successful even when opium has failed.

3. *Purging*—especially when painful and bilious, or accompanied with much flatus or griping. Also in windy or bilious colic or dry bellyache, with ejection of stinking, coppery-smelling flatus.

4. *Jaundice*—Especially if attended with clay-colored diarrhœa.

5. *Sick Headache*—Almost always efficient.

6. *Neuralgia* of head and temple, especially if attended with derangement of stomach or liver. It seems to act very favorably on the liver, equalizing its secretion, whether deficient or in excess.

7. *Tympanitis*—This is especially the case in lying-in women, soon after confinement. If suppression or retention of urine accompanies it, then, in alternation with Tr. Arnica, in a few hours all the symptoms are reduced.

In fact, it is a gastric and hepatic remedy, addressing itself to those two organs, and, of course, their sympathetic affections; in consequence of which I have cured with it cases of hæmorrhage from the bowels, owing to a congestive state of the liver. I cured an officer with hæmorrhage of the bowels consequent on Mexican diarrhoea. He was anæmic; cured, and became quite hearty. It is very good in persons who say they feel bilious in the spring and fall of the year, with coated tongues.

It relieves the pain and irritation of indigestion, and if taken by persons of a dyspeptic nature, immediately after a meal, gives great relief. I am frequently asked if it was opium or morphine I had administered.

[Dr. Hale's volume of Provings contains a new and extensive proving of *Iris versicolor*.—Ed.]

BAUNSCHEIDTISMUS.

Dr. A. HALL reports: "The article in a recent number of OBSERVER on Baunscheidtism should interest the profession generally. My partner, Dr. Hoffman, received some months since from Baunscheidt his instruments and oil, and has applied them with remarkable success in many of the most painful, as well as some of the most desperate cases of sickness we ever met with. Some of these could not have recovered from any other known remedies or treatment.

"Its rallying powers, where the vitality of the system is almost extinct, as we have witnessed in typhoid pneumonia, conges-

tion of the lungs, diphtheria, neuralgia, etc., have been astonishing.

"The effects are really magical in restoring immediate warmth and circulation to the surface in decidedly cadaverous conditions."

THE LEBENSWECKER.—Dr. D. A. Davis reports:—"I have cured several cases of Neuralgia, and I am using it on my limb to stimulate the nerves. I have used it in several cases of spinal debility with good results. I have also reduced a wen, or sort of tumor, on the back of my neck, of thirteen years' standing, to about one-third of its size."

HIGH DILUTIONS.

BY C. F. CUSHING, M. D.

While a student of medicine, and for some time after, I had no faith in high dilutions, and was only induced to give them a trial occasionally in cases where the lower attenuations of the best selected remedies failed, and the result of my experience has been to establish the conviction that cases frequently occur in which a speedy and permanent cure can only be effected by the higher preparations of our remedies. Is not the profession drifting towards materialism? Do not the reports of treatment, especially where new remedies are used, and particularly among western homœopaths, tend to show a lack of faith in the curative power of the higher dilutions?

Dr. Cushing is right in the opinion that our western homœopaths generally do not confide in the high potencies. They think that it is not proper, after a low attenuation has been used, and an immediate good result not obtained, that then one of the high potencies should be employed, and, if the patient is cured, attribute the cure solely to the use of the higher dilution. So of provings with high potencies after the organism had been previously "saturated with massive doses of the original drug." We think that credit must be allowed in each case to the original medicine employed. Cures are doubtless performed with high dilutions, and in many cases medium dilutions are preferable to low, and *vice versa*. Let physicians carry out their own convictions as to potency, cease to deride those who employ doses different from their own, and

communicate for the benefit of the fraternity every item of experience which is at all likely to be useful.—[Ed. Obs.]

Reviews & Book Notices.

THE AMERICAN DISPENSATORY, by John King, M. D. Royal octavo, 1500 pages.

The sixth edition of this favorite Eclectic work has been just issued from the press by Messrs. Moore, Wilstach & Baldwin, publishers. It contains much that is useful and interesting to all Homœopathic physicians. They will, of course, read it *Eclectically*, rejecting, as worthless to them, the empirical use of a large number of drugs, and gathering up on almost every page information of permanent value. In addition to the known medicinal properties of the plants usually described in works on *Materia Medica*:

Part I contains an account of a large number of medicinal plants indigenous to this country, many of which were for the first time presented to the profession in this work, giving their botanical descriptions, general chemical histories, therapeutical properties and uses, together with a large amount of information relative thereto, of practical value to the chemist, pharmacist and physician.

Part II contains practical pharmacy.

Part III is devoted to the various mineral medicines, their chemical histories, therapeutical virtues and uses, together with a vocabulary explaining the Latin words and abbreviations frequently met with. The work contains a full and complete index, so arranged that any medicine, etc., may be promptly found without any delay or difficulty.

The publishers say: "Although many valuable Dispensatories have been presented to the physicians and pharmacutists of this country and Europe, they have all, excepting the former editions of this work, been confined to an account of those remedies only which have been recognized and employed by that class of physicians termed 'Old School,' or 'Allopathic,' and have, therefore, only partially answered the purposes of the large number of progressive

medical men found in these countries. There is no other work in Europe or America containing such completeness of information regarding the history of therapeutical virtues, and uses of indigenous and exotic medicinal plants; and, indeed, much of the matter presented can be found in no other volume extant. To render the work practically useful to the physician and pharmacist, and to bring it up to the discoveries and improvements in medical science of the present day, neither pains or expense have been spared."

At another time we hope to give this work a more extended notice. Some may complain of the high price (\$8), but it is probably as low as a work of this size can be afforded, paper and printing expenses being about 50 per cent more than formerly.

NEW HOMŒOPATHIC PROVINGS.

EDITED BY E. M. HALE, M. D.—1 VOL., 8vo.

This book is more comprehensive than was at first contemplated, and contains some 25 per cent. more matter than was promised in the prospectus. There will be no advance in price to subscribers of course, but we cannot receive any more subscriptions at less than \$2 50 for the book, or \$3 for the work, and the OBSERVER, for the current year. A medical writer who has examined some of the work in sheets, says: "The style and type are faultless; the method of arrangement admirable; and the book will form an invaluable addition to our *Materia Medica*." It will appear in England simultaneously with its publication in the United States—Messrs. Henry Turner & Co., of London and Manchester, publishers.

MEDICINES have been put up to accompany the work, and will be furnished upon the following terms:

Box of 40 remedies in 1 oz. vials, \$11; with Book, \$18
Do. 40 do. $\frac{1}{2}$ oz. do. \$7; do. \$9
Do. 20 do. selected to order in ounces, without Book, \$6; half ounces, \$4.

We are in receipt of the following note from Dr. Hale:

HIGH POTENCIES OF THE NEW REMEDIES.
E. A. Lodge, M.D.:

DEAR SIR: The interest now manifested in the high potencies, and the laudable desire

existing in the minds of many of our ranks to test their virtues in disease, leads me to propose that you prepare carefully for the profession the 30th, and even 200th, of the remedies included in the volume of New Provings, now in press, and that these attentions be in readiness to be ordered with the lower potencies.

I will here casually remark, that the high potencies of the new remedies appear to me to be more particularly indicated in those functional disorders which precede structural lesions, and for those diseases which affect the higher and more delicate tissues of the organism (or rather of its ultimate cells).

Dr. Joslin used the 30th Rumex with brilliant results. Dr. Hering and myself have effected cures with the 30th of Sanguinaria; and I am cognizant of cures resulting from the administration of Cimicifuga 15th and Baptisia 10th. E. M. HALE, M. D.

CHICAGO, May, 1864.

In reply to Dr. Hale, and for the information of others, we would state that we are prepared to furnish the dilutions of all the new remedies up to the 30th, but we do not expect to have time to prepare any higher than this potency for some months.

The quotations given above are for the medicines in any form from pure mother tincture up to the 30th dilution.

NORTH AMERICAN JOURNAL OF HOMŒOPATHY.—The May number, 1864, No. 48, now before us, closes the 12th volume of this standard publication. Articles: The plan of the Campaign, and the elements of Victory, by F. W. Hunt, M. D., of New York. Cancer, its pathological diagnosis and treatment, by R. McLimont, M. D., and C. H. Marston. Pseudo-membranes, by R. Ludlam, M. D. Old and new Physic—a comparison, Part Second, by Wm. Todd Helmuth, M. D. The proper period of operating in Hare-lip, by J. H. Marsden, A. M., M. D. Gleanings, and Condensed Translations from Foreign Periodicals, by S. Lillenthal, M. D., of New York. Spotted Fever, or Typhus Petechialis—an interesting case, by B. W. James, M. D., of Phila-

delphia. Homœopathy in the Sandwich Islands, by H. Robinson, M. D. Miscellaneous Items, Reviews, and Materia Medica notes.

The thirteenth volume will commence with the next number—August, 1864.

THE AMERICAN HOMŒOPATHIC REVIEW.—The May number contains: The Morbid Fear of Hydrophobia, by C. Hering, M. D.; Lachnanthes tinctoria, Proving by Ad. Lippe, M. D.; Hydrocele, by B. Fincke, M. D.; Pulsatilla in Mal-Presentation, by M. B. Jackson, M. D.; Kerosene, a homœopathic remedy for burns, by A. J. Jenner, Esq.; Chronic Cerebro-Spinal Disease, translated by C. Dunham, M. D.; Case of Ascites, by H. Robinson, M. D.; Aloes, translated from Hering's "Amerikanische Arzneipruefungen," by T. F. Allen, M. D. Homœopathic Literature; St. James's Hospital, Doncaster; Homœopathic Medical Society of the State of New York.

Vol. V will commence with the July number.

THE WESTERN HOMŒOPATHIC OBSERVER—Monthly. \$1 per year. Conducted by Wm. Todd Helmuth, M. D. Published by Dr. H. C. G. Luyties, St. Louis.

May number not received at this date (May 20).

MEDICAL INVESTIGATOR—Monthly. Published by C. S. Halsey, Chicago. \$1 per year.

May number contains: The Mission of the Medical Profession, and the Principles that should control the action of its members—an Introductory Lecture, by A. E. Small, M. D. The Hypophosphate of Lime; by E. M. Hale, M. D. Arsenicum and Dysentery by C. W. Boyce, M. D. Hamamelis virginica in Ovarian Affections. The Physiological Effects of Atropine. Miscellaneous Items.

(BRITISH) HOMŒOPATHIC OBSERVER.—May number commences the third volume of this interesting magazine. Contents are: The disease-producing power of drugs; Farunculi caused by Sulphur; Reviews, Miscellaneous Items, and Medical Intelligence.

Personal.

Dr. JAMES C. HARRINGTON was united in marriage to a very estimable young lady on the Lord's Day evening, May 15th, at the First Methodist Church in Detroit.

"Across the threshold led,
And every tear kiss'd off as soon as shed,
His house she enters, there to be a light
Shining within when all without is night—
A guardian angel o'er his life presiding,
Doubling his pleasure, and his cares dividing!"

SURGEON GENERAL HAMMOND. We are gratified by hearing of this gentleman's acquittal.

GEO. E. SHIPMAN, M. D., removes from Chicago to Northford, Conn., for the benefit of his health.

D. S. SMITH, M. D., takes the chair of Materia Medica and Therapeutics in Hahnemann Medical College.

CHAS. F. REED, M. D., will be Professor of Physiology and Pathology in Hahnemann College, in place of PROF. LUDLAM, who will take the department of Obstetrics and Diseases of Women and Children.

Dr. Hale sends us the following "personal" items relating to prominent physicians.

Dr. P. P. WELLS has just returned from New Orleans. He writes: "Yours was received during my absence at the South, from which curse-covered land I have just returned, after being made sad, and then sick there for more than two months. I am still suffering from the effects of poisonous gases from the *open* canal, into which the drainage of all New Orleans is poured; which gases made their mark on me the first opportunity. This is the fourth time I have suffered from the same cause."

Dr. W. H. HOLCOMBE, whose writings once formed so prominent and interesting a part of the North American Journal, but who was for nearly two years a member of the Southern Confederacy, is now in Natchez. A terrible calamity has lately befallen his family, in the loss of two dear children by malignant scarlatina, complicated with diphtheria. Nearly heart-broken, he cannot reside among the scenes which constantly remind him of his loss. He therefore designs to remove to New Orleans, and engage in

active practice. With his energy and genius, he will doubtless make his mark in that city. He leaves a large practice, which he is anxious some good homœopathist should take.

Obituary.

HENRY CRAIG.—The death of Mr. Henry Craig, on the 22nd of last April, will be sad news to many readers of this journal. He has long been well and favorably known by his connections with the Western Homœopathic College. For the last five years, the class of each session, has, at the close of the lectures, parted with no one more reluctantly than with the genial, whole-souled, kind-hearted janitor, who, by his attentiveness and good humor, lightened the hours of many a wintry day. Several years ago, Mr. Craig came to this country a poor man. He soon became an ardent lover of his adopted home, and of the laws and customs of the people. He was also an enthusiastic admirer of Nature;—he loved beyond measure birds and flowers, while at the same time he cultivated a strong taste for the fine arts. The invention, a year or two ago, of the celebrated *Craig Microscope*, gave Mr. Craig a just celebrity, and secured for his family a very desirable competency. He died suddenly, and at an early age; but death did not rob us of him, until he had earned for himself a worthy and imperishable name. No fear of death darkened his mind at the last hour. "O my adopted country!" said he, "I pray God you may come out victorious from the strife." And thus fell asleep a good citizen, a kind father, and a sincere lover of his God, his country and his fellow-men. W.

CLEVELAND, O., May 4, 1864.

Special Notice.

MICHIGAN HOMŒOPATHIC INSTITUTE.

The Association will meet on Wednesday, June 8th, 1864, at 10 A. M., in the basement room of Christian Church, corner of Beaubien and Jefferson avenue, Detroit.

For account of Special Committees who are expected to report, see p. 80 Observer.

EDWIN A. LODGE, Secretary

A M E R I C A N

Homoeopathic Observer.

"Similia, Similibus, Curantur."

"I present you with a Truth long sought for, a principle of eternal nature, I appeal to existing facts alone to convince you; and when a conscientious and complete course of study shall crown your researches with success, then, as I have done, bless Providence for the immense benefaction he has allowed to descend upon the earth through my humble agency, for I have been but a feeble instrument of the Omnipotence, before which we all bow in humility."

HAHNEMANN.

Vol. I.]

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Societies & Dispensaries.

MICHIGAN HOMOEOPATHIC INSTITUTE.

Fifth Annual Meeting.

The fifth annual meeting of the Michigan Homoeopathic Institute was held at the Christian Church, Detroit, on Wednesday, 8th June, 1864.

The Society was called to order by the President, A. Bagley, M. D.

At the request of the President the Divine blessing was invoked in an appropriate prayer by Dr. T. B. Lamb.

The minutes of the last meeting were read and approved.

On motion of Dr. F. X. Spranger, an invitation was extended to Professor A. O. Blair, of the Western Homoeopathic College, and Drs.

H. C. Allen and A. H. Thompson, from Canada West, to participate in the proceedings.

Dr. Lodge, of the Committee on Publication, made a verbal report, which was accepted.

Prof. Hempel, on behalf of Committee on Homoeopathic Professorship in State University, made a report, and recommended a Committee of Inquiry.

Dr. Doy supported the recommendation. Subject deferred to afternoon session.

Dr. L. M. Jones, of the Committee on Proving, made a report, which was accepted, and the subject recommitted for further consideration.

PATHOLOGY.

Dr. E. H. Drake, of Committee on Pathology, presented a report, which was accepted, and ordered to be printed.

Prof. Blair spoke in favor of some of the views which had been advanced, dwelling particularly upon the importance of giving but one remedy at a time. We should cure our cases with single remedies if possible. Select the right drug in the right attenuation; the shot depends upon "the fineness of the aim."

Prof. Hempel referred particularly to the fact that the lower triturations of the remedy which had been referred to (Lycopodium), were very imperfect preparations. If you examine the third trituration with a microscope you will find that the subtle spores have not been crushed at all. You must go up to the sixth trituration at least before you obtain any division of these slippery particles. The alcoholic attenuations act well. He uses the watery infusion in urinary difficulties; in organic affections he would prefer the higher attenuations.

Dr. Drake was of the opinion that decided effects had been produced by the third trituration in his hands, and several interesting cases were related by him.

Dr. Doy referred to a case of urinary trouble relieved by Lycopodium second and Nux second.

The Committee on Hygiene not being prepared to report, the subject was deferred to the next annual meeting.

Dr. Drake, of Committee on Surgery, made an interesting report, which was referred to Committee on Publication.

Dr. Roberts, of Committee on Medical Ex-

tricity, gave a report referring to the principles which should guide us in the administration of electricity in disease. Subject recommitted.

Adjourned to 2 P. M.

AFTERNOON SESSION.

Dr. Smith Rogers, of Committee on Surgery, presented an interesting report, which was accepted, and, on motion, referred to Committee on Publication.

Dr. Doy, of Committee on Obstetrics, made a report illustrating the use of the coileuryuter in cases of uterine hemorrhage. He also referred to the value of coniohyllum preparatory to accouchment.

The Committee on Dose, reported by their chairman, Dr. C. J. Hempel. The question ought not to be a complicated one; yet it has been made a battle-field. There are two hostile camps—the high and the low dilutionists. The division is not called for. There is a homoeopathic principle of cure; but there is no such thing as a homoeopathic dose. Large or small, pure tincture, or two-hundredth attenuation, the physician is entitled to use any dose he pleases, so that he can justify its use on scientific principles. What dose is required, to cure in the given case?—this is the question. That dose is proper that cures safely, quickly and pleasantly. It may be in one case a dram of pure tincture, in another a globule of the 300th potency.

The Doctor then proceeded to relate a case of crusta serpiginea cured with a globule of the two hundredth of arsenicum; and another of albuminuria, cured with phosphoric acid, in which from three to 75 drops a day of the acid were used. Another case of albuminuria yielded to one dose of five drops of the same.

The remarks of Prof. Hempel elicited a discussion which was participated in by Drs. Smith Rogers, L. M. Jones, H. C. Allen and T. B. Lamb.

Dr. A. R. Ball, from the Committee on New Remedies, presented a report, which was accepted and referred to the Committee on Publication.

The Committee on Epidemics reported, by Dr. Doy, who related a fatal case of an obscure character, which occurred at Battle Creek. Remarks followed by Drs. L. M. Jones, E. H. Drake and Prof. Blair.

ELECTION OF OFFICERS.

The Institute proceeding to an election of officers for the ensuing year, the following were unanimously elected.

President—C. J. Hempel, M. D.
Vice President—E. H. Drake, M. D.
Secretary—E. A. Lodge, M. D.
Treasurer—F. X. Spranger, M. D.
Censors—Doctors J. A. Albertson, Smith Rogers, E. H. Drake, H. B. Covert and A. Bagley.

DR. E. M. HALE.

On motion of Dr. Smith Rogers, it was unanimously

Resolved, That we observe with pleasure the announcement of the Hahnemann Medical College of Chicago. We have great regard for its talented faculty and desire that the institu-

tion may continue to prosper. At the same time we express our sincere regret that Dr. Edwin M. Hale should have been retired from the chair of materia medica. Without at all depreciating the merits of his successor, we record an expression of the high estimation we have for Dr. Hale's superior talent in this department; and we hope that he will be called upon to lecture again next winter.

ANNUAL ADDRESS.

The annual address was then delivered by Alvin Bagley, M. D. The paper was well received by all the members of the Institute, and it was resolved to refer it for publication to the usual committee. The doctor having advanced some views which appeared to differ from other physicians, a very interesting debate ensued. Drs. Hempel, Bagley, Drake and others participating.

EXCLUSION FROM THE ARMY, ETC.

On motion, it was unanimously resolved that the Institute concur in the action of the Western Institute of Homoeopathy at their meeting May 20th, 1894, in relation to the exclusion of Homoeopathic physicians and surgeons from the army and navy, and that the following committee be appointed to confer with the Committee of the Western Institute, or any other society; and that they have authority to memorialize Congress or the War Department in the name of this organization: Drs. C. J. Hempel, E. H. Drake and A. Walker.

SPECIAL COMMITTEES.

The following Special Committees were appointed:

On Publications—Drs. E. A. Lodge, E. H. Drake, and H. B. Covert.

On Homoeopathic Professions in State University and on Homoeopathic Colleges—Drs. E. H. Drake, J. N. Baridre, C. J. Hempel, Smith Rogers, J. M. Long and G. T. Rand.

On Proving of Cholera pluvio—Dr. A. R. Ball and Dr. A. B. Spinney.

On Proving of Rubens pseudo-acids—Dr. F. X. Spranger and Dr. P. E. Hale.

On Proving—Dr. L. M. Jones and Dr. C. A. Williams.

On Pathology—Drs. E. H. Drake, A. H. Botsford and F. Finster.

On Hygiene—Drs. E. A. Lodge, A. W. Walker and Isaac Douglas.

On Surgery—Drs. E. R. Hills, A. J. Sawyer, E. H. Drake and Smith Rogers.

On Obstetrics—Drs. A. Walker, A. Bagley, G. W. Pattison and John Doy.

On Medical Electricity—Drs. Joseph Gill, E. L. Roberts and J. A. Albertson.

On Physiology—Dr. C. A. Jefferson, I. B. Tuttle and H. C. Bagg.

On Nitrate Chromium—Drs. H. T. Hawley, S. F. Harris and Lewis Taylor.

On Dose—Drs. C. J. Hempel, J. B. Hyde, I. D. Craig and John E. Smith.

On New Remedies—Drs. A. R. Ball, J. N. Bridgde, Orrin Fowle, S. N. Coons and A. Farnsworth.

On Epidemics—Drs. A. H. Botsford, C. J. Covert and John Doy.

Dr. E. H. Drake was selected to deliver the next annual address.

The Institute then adjourned to meet again on the second Tuesday of June, 1895, at Detroit.

ILLINOIS STATE HOMŒOPATHIC MEDICAL ASSOCIATION.

The Tenth Annual Meeting of this Society was held in Hahnemann Medical College, in the city of Chicago, on the 17th and 18th of May, 1864.

The Convention was called to order by the President, Dr. D. S. Smith. The opening prayer was made by the venerable Dr. L. C. Belding.

Dr. A. E. Small reported on Catarrhal affections during the past year. He premised that the mucous membranes were the seat of these diseases, and were abnormally excited by changes of temperature. The French physiologists spoke of catarrh as including affections of the mucous membrane in any part of the body, but in this country the term was limited to the affections of the super-pneumal air passages. Nasal catarrh (*coryza*) was caused by excitement of the pituitary passages. In itself it was of little consequence, but often led to inflammation of the eyes and ears. It should, therefore, be looked to. Catarrhs implicating the trachea, larynx, and bronchial tubes, are more complex in their character, and have been prevalent during the past year. It was epidemic in this city about the time of the Northwestern Sanitary Fair: hundreds were suddenly affected by it, owing, doubtless, to unusual exposure to variable conditions of the atmosphere. It was marked by a feverish dryness of all the pituitary passages, accompanied by tickling. The succeeding stage was in many cases marked by feverish inflammation; and in some, there was marked congestion. Aconite, in the invading or dry stage, was generally successful; but, as aid was not often called in this stage, Aconite, from the first to the sixth attenuation, followed by Belladonna, was found to be effectual in the second stage. Phosphorus, and other remedies, were administered in divers cases. Homœopathic treatment was almost uniformly successful.

The report was received and referred to the Publishing Committee, on motion of Dr G. D. Beebe, who referred to a remarkable case of *coryza* during pregnancy, in which the mucus emissions were very persistent and rapid. The case seemed to resist Silicea, Arsenicum, Pulsatilla, and other usual remedies. Allium cepa was finally prescribed, and was followed by almost instantaneous relief. The remedy was comparatively a new one; it had been used by him with great success in other cases of bronchial affection.

Dr. I. S. P. Lord spoke of the causes of catarrh. He saw no reason why one form of the disease should be referred to general causes, and another to a special cause; neither did he see how it was that general causes should produce specific results.

Dr. L. C. Belding reported a case of catarrhal affection of the eyes which had yielded to homœopathic treatment when other means had failed. Arsenicum was used. In some cases the Mercurius solubilis had been of great efficacy, especially where burning of the lips was present.

Dr. D. G. Beebe, the Secretary, offered the following:

Whereas—The opponent of the Homœopathic School of Medicine persists in misrepresenting its doctrines, as well as its status in point of liberal endowment; and *Whereas*, many of the prominent members of the Allopathic School, from no

other cause than difference of opinion concerning the principles and practice of medicine, claim the right to falsify our views, calumniate our principles, misrepresent our practice, and deal in secret and open detraction, in alluding to the character of its members; therefore,

Resolved—That in the opinion of this Association, its members can better serve the interests of science, as well as the communities in which they live, by preserving a commendable dignity of character, and by refusing to meet *billingsgate* and *blackguardism* with similar opposing influences.

Resolved—That in the opinion of this Association, it is unbecoming the members of a scientific profession to engage in detraction, or vilification of those who should be co-workers in the advancement of scientific truth.

The speaker then referred to the late session of the Illinois State Medical Society, and the language used there, as a reason for the passage of the Resolutions.

The Resolutions were spoken to by Drs. Smith, Small, Pratt and others: the last-named gentleman referred in strong language to the false accusations which had been made against homœopaths *en masse*.

The Preamble and Resolutions was then adopted.

In the course of the discussion, it was stated that the whole matter of examining surgeons for the army, had been placed in the hand of the Allopaths, who had determined not to admit any Homœopathic practitioners, no matter what were his qualifications. The Chairman of the examining Board here, had, in answer to an official question, made written answer that, "The Board declines to recommend a Homœopathist." The Board had not passed a Homœopath, though many had passed examination with credit—one exception was made, but in that case the gentlemen was pushed through by other circumstances.

The Secretary called attention to the necessity of appointing a Committee on Surgery. The Committee had requested him to supply the present omission by presenting a volunteer Report.

The history of surgery was one of struggle against heroic medication; until lately it had not been placed on a proper basis, but it had recently received due attention.

He wished to present an improvement in the method of reducing fracture of the shaft of the femur in young children. When called to any case of fracture in the femur, he would seek to give a fixed location to the tibia and spinal column, which would necessarily give a settled direction to the intervening thigh bone. A splint made of tin (can be made in about half an hour) is placed on the outside of the limb. The fracture in children is usually transverse, hence extension and counter extension are not so necessary as with the adult. The limb should be flexed, as that is the natural position of the limb in children. He had treated three cases during the past twelve months on this plan, each of them very successfully. One of them was a very singular case of spontaneous fracture, while the child was in good health. The predisposing cause of the fracture was scarcely fragilitas ossium, as the connecting links were rapidly supplied. He thought that the cause was rather to be found in the variable pressure



ponderance of earthy over the cartilagenous matter, as exhibited not only at different ages, but in different individuals at the same age. Symphytum seemed to be very favorable to the formation of the connecting cartilage in cases of fracture. Dr. B. then exhibited a model of his appliance, fitted with a ratchet, for use in case of oblique fractures, as, are usual with adults, where extension and counter extension are needed to be applied with greater force to prevent shortening by overlapping. The principal idea of the method seemed to be the *flexure* of the limb, making the pelvis and the lower limb fulcrum of extension, as well as points of support.

The Report was accepted and filed.

Dr. R. Ludlum proposed that a discussion take place regarding that catarrhal or bronchial affection which has been so prevalent during the winter, being almost an epidemic, and which has frequently been mistaken for actual pneumonia. The cases commenced generally with remittent fever, with a great deal of respiratory oppression, and slight vomiting, though generally almost an entire suppression of the mucous discharges of the chest. This condition often would last for twenty-four or thirty-six hours. It would not be marked by hepatization, all the changes being connected solely with the bronchial tubes; after that time there would be an excessive discharge. But there would be no hepatization in the second stage, which is characteristic of pneumonia. Phosphorus, or Aconite and Belladonna he considered to be the proper remedies to break up the complaint. In very stubborn cases he found the *Gelsemium* efficacious. In the case of adults some very sudden deaths had occurred from a real overflowing of mucus upon the lungs.

Dr. L. C. Belding, Milledgeville, thought the cases quoted very similar to some that had occurred with him. In advanced stages he frequently used Tartar emetic, or some similar drug, to stay the mucus discharge. He called the disease a bilious intermittent fever.

Dr. L. Pratt, of Rock Creek, Carrol county, also had several examples of a like nature, and had great faith in Tartar emetic. When an Allopathist he noticed the extraordinary effects of this remedy in bronchial catarrh, but did not then fully appreciate its properties. He used a few grains dissolved in half a tumbler of water, and a teaspoonful or so every three or four hours.

Dr. Coe mentioned a case of chest affection somewhat analagous to those noticed, where, in connection with the lung affection, there was a severe dropsical effusion. He used *Apis*, *Arsenicum*, and other similar drugs. Among the symptoms was severe hacking cough, when she expectorated a quantity of *serum*, and also a large discharge of *pus*. At the cessation of this discharge, hemorrhage set in, and death immediately ensued.

Dr. G. D. Beebe gave some of the *post mortem* appearances of this bronchial catarrh. A short time ago, a man in this city was taken suddenly, ill late one evening, and died within ten minutes in severe pain. At a *post mortem examination* the whole of the nobler organs, except the lungs, were in an abnormal condition. The lungs were thoroughly saturated with an excessive effusion of mucus.

Dr. R. B. Clarke had found that whenever

Tartar emetic or crude Antimony failed, *Ipecac* answered well, and, indeed, worked like a charm.

Dr. D. A. Cheever, treated the majority of his cases with either Aconite, Phosphorus or Tartar emetic. When these remedies failed, he found *Bryonia* and *Ipecac* to be excellent.

Dr. R. Ludlam said, that often pneumonia was considered to be secondary with measles. It was called lobular pneumonia, but he did not believe that it was pneumonia at all.

Dr. Temple considered that the affections in children frequently called pneumonia, were always confined to the bronchial tubes, and that Tartar emetic was about the only safe remedy.

The Secretary, Dr. Beebe, read a brief report of a case of dropsy, which had been cured under the use of a large number of remedies; the paper was prepared by Dr. Scofield.

Dr. Ludlam inquired if there was not an increasing disposition with the profession to give more than one remedy at a time? He could find some excuse for the use of two remedies by country practitioners, and possibly for the leaving of a third, in case of contingency, sometimes; but this rapid alternation of three, four, or six remedies must only tend to confusion, and harmful results. He could not, for the life of him, tell which remedy was the successful one in the case just reported. He considered it the safer plan to keep one remedy at a time, as much as possible, in order that its action may be fully known and appreciated.

Dr. Scofield found that generally one remedy is the best, though often when these failed he combined those which were needed.

Dr. L. C. Belding did not believe in combined remedies, either administered simultaneously or in succession, when the physician could see the patient frequently.

Dr. C. A. Jaeger also considered one remedy to be best. He had seen cases where physicians caused a young child to take seven remedies in less than fifteen hours. He did sometimes give an alternation of two remedies, but then he ordered one remedy to be given for ten or twelve hours, and then before he gave the second, ordered a perfect cessation for about the same time. Prof. Temple thought that when the symptoms of a case were rightly got, one remedy only was required; the patient need not be seen every few hours, for if the case is rightly understood the effect may be anticipated. Combined remedies were not the result of the truths of Homœopathy.

Dr. J. C. Burbank reported two cases of *phthisis pulmonalis*, which he had cured by the continuous use of loaf sugar. In the one case the patient came from a family pre-disposed to consumption, and in her own person exhibited all the ordinary incipient symptoms of that disease. At one of the meetings of the Association he had heard some physicians recommend the use of sugar, and had resolved to try its efficacy. He prescribed it in doses of two ounces, taken morning and evening, and also for the first few days of the treatment gave Phosphorus, of the third attenuation; the patient improved rapidly; her dangerous symptoms disappeared, and she is now apparently entirely recovered.

The other case was similar in general outlines, and he pursued the same treatment, with, so far, very similar results. This patient is still under

his cure, with every prospect of ultimate recovery Dr. Burbank was not prepared to say whether the sugar, or the phosphorus, effected the cure.

Dr. Smith, the Chairman, said that he had cured a woman of the same disease by administering a single dose of Phosphorus. The patient in that case was the daughter of a Homoeopathic physician, and there were no Allopathic prejudices to overcome, which might, perhaps, account for the rapidity of the cure.

Dr. Lord said that the accounts of cures and statements of cures reported from memory, were extremely unsatisfactory. He had found this in his own experience. He recollected that twenty-five years ago he was called to treat a person for *pulmonic pulmonalis*, and that he had given her every thing he could think of, Phosphorus among the rest, and she recovered in spite of it.

Dr. Temple asked if sugar was a medicine, and if not a medicine, how it could cure disease.

Dr. Boobe said that the carbonaceous preparations had been used for the cure of pulmonary diseases, from time immemorial. Cod Liver Oil had been and is still used to a considerable extent, as well as Bourbon whisky, and other alcoholic preparations. He thought these remedies acted as palliatives, they were taken into the stomach, and carbonic acid gas evolved, which acted in some sense as an anesthetic. The question to be considered was whether, some carbonaceous preparation could not be used which would produce desirable results, without the objectionable effects of Cod Liver oil and whisky, and whether sugar were not that preparation.

Dr. Ludlam read an interesting paper on *Physiological Infidelity*. We extract a small portion only, for want of space:

"Physiological Infidelity implies a lack of knowledge and faith in the laws which govern the animate creation. As it concerns Human Physiology, this unfortunate skepticism is manifested in a variety of ways. Objectors to its practical value fall off into three lines: those who will not accept the teachings of Physiology because their professional predecessors deemed them unworthy of trust; those who object that its tenets are constantly changing, and who are too indolent to keep pace with its development as a science; and those who refuse to adopt or to endorse it, because such a course would, of necessity, modify those views of the treatment of disease to which they are so closely wedded.

Concerning the prevalence and treatment of puerperal fever, an illustrating his general theme the Committee remarks: "In the city of Chicago there are at present thirty Homoeopathic physicians who are engaged in the practice of medicine. Nearly all of these practitioners are fully persuaded the puerperal fever has not been epidemic in Chicago during the past year. Only two sporadic cases have occurred in their united experience; the question is pertinent. How does it happen that physicians in the same city, with patients, perhaps, next door, should have such varied experience? Our Allopathic brethren have declared this disease epidemic, or, at least, more than usually prevalent among us. Can it be possible that patients of one faith in medicine suffer in every case, while others escape; or that Drs. D. or M., should have treated every example

of this disease, while none of my thirty brethren had any such experience?"

"The chief cause of the alarming and fatal cases which have, and do so, frequently occur, is believed by the majority to be the habit of prescribing cathartics and opiates for women in child-bed. This practice, which has nothing but tradition to recommend it, no sanction but usage, and no history but that of harmful and evil consequences is severely, and yet justly, criticised." The paper closed with a strong appeal for the necessity for a thorough familiarity with, and a development of the sciences collateral to medicine.

Dr. Lord reported the recent death of a lady in the West Division, in child-bed, from the use of lobelia and other "regular" remedies. She was killed in his opinion *causam artem*.

Dr. Ludlam reported a case of what had been diagnosed an erysipelatous affluence of the rectum, which he thought was induced by the use of cathartics in child-birth.

Dr. Holding related his experience in the use of cathartics in child-birth as an Allopathist, and as a Homoeopathist; his experience was vastly in favor of the latter mode of treatment.

Dr. Pratt had lost a patient afflicted with puerperal fever, because the nurse had, unknown to him, administered a cathartic.

Dr. Ober had generally disavowed the use of cathartics in cases of child-birth. He had endeavored to assure his patient that an immediate movement of the bowels was unnecessary. In some instances his patients had taken mild cathartics without disastrous results.

Dr. Pratt reported a case where movement of the bowels did not take place for two weeks after delivery, and yet the patient recovered.

Dr. Anthony thought that if patients would take cathartics, they should do so upon their own responsibility.

Dr. Reed said that the physiological infidelity in obstetric practice was not confined to the treatment of mothers; the innocent child often came in for a large share of the evil resulting from the Allopathic mode of treatment. Dr. Temple in his remarks upon the same subject, said that the mortality reports showed that at least one-half of all the deaths reported were among children under five years of age, and charged that this was the result of criminal Allopathic practice. It was an abominable system, in his judgment.

Dr. E. M. Hale read a paper, of some length, upon the history, causes, symptoms and diagnosis of Retroversion of the Uterus. He gave the latest teachings concerning the pathology of this painful, and often intractable disease, and entered into a general resume of the best methods of treatment, adopted by the Homoeopathic and Allopathic schools. The treatment, according to Dr. Hale, consists of proper mechanical appliances to restore the uterus to its proper position, and to maintain that organ in its normal place in the pelvic cavity. The medicinal treatment, sanctioned by the experience of the Homoeopathic school, together with some original suggestions, was given in general terms. It was claimed that this method was very successful in the treatment of this disease, and its various sympathetic symptoms.

The report of Dr. Hale was received, and referred to the Committee on Printing.

Dr. Colton then read a paper on "External Remedies and Mechanical Appliances" in the treatment of diseases. He said that under certain conditions, heat and cold are powerful therapeutic agents. The human organism is sensibly affected by changes in the atmosphere, acting primarily upon the skin, as well as through the passages. The respiratory influences of heat are observed in the relaxation of the respiratory processes, while cold produces the reverse condition. Water, as an adjunct, is equally necessary and useful. Blisters, setons, issues, etc., have been in use a long time, and their abuses are no less palpable than the poisons poured down the throats of the innocent victims to unscientific professional treatment. He would not say that vesication is never useful, but in ninety-nine cases out of a hundred better measures are at hand. To think of a seven-by-nine plaster of Spanish flies over the chest, accompanied with a pill of blue mass internally, every two hours, for simple pleurodynia, made him shudder, though it was years ago that they were administered to him. Homœopaths had found a better remedy in Nux, or Arnica, which effectually removes the difficulty in a few hours.

The doctor then gave an elaborate anatomical description of the skin, and argued the question of cutaneous absorption at some length, and arrived at the conclusion that agents may affect the system, through the skin, in three different ways: 1st, by simple contact with the sound skin; 2d, by forcing the substance through the cuticle by means of friction; 3d, by bringing the matter to be absorbed in contact with the deeper portion of the skin, after the superficial layer of epidermis is removed. The application of external remedies the speaker showed to have been recommended by the ancients, from Hippocrates down.

Although Hahnemann finally proscribed the use of all external remedies, except it might be an externally limited number, many of his followers without the least disrespect to him or his memory, have seen fit to adopt them. The doctor then narrated the different external remedies used by the profession, and briefly recounted their operation.

The Report was received, and ordered printed.

Dr. Cooke offered the following, which, on motion, were adopted unanimously:

WHEREAS—At a late meeting of the Illinois State Medical Society, the subject of *Puerperal Peritonitis*, its epidemic prevalence, and great fatality, were discussed at length; and,

WHEREAS—The very significant and important fact that no such epidemic has been observed by Homœopathic practitioners throughout the State, was entirely left out of said discussion therefore; be it

Resolved—That we hereby solemnly declare to said Society, and to the public, our conviction that the existence and the fatality of said disease, are due almost wholly to the cruel and absurd practice to which the patients of Allopathic physicians are subjected.

Resolved—That in the opinion of this Association, the most prolific, exciting cause of *Puerperal Peritonitis* is the frequent administration of *purgatives* and opiates to nearly every victim of the malady, within a few days after delivery.

Resolved—That a copy of these resolutions be furnished to the newspapers of the State, for publication, and that a copy thereof be spread upon the records of the association.

OFFICERS ELECTED:—*President*—W. C. Anthony. *Vice Presidents*—R. Ludlam, J. C. Burbank, E. M. McAfee. *Recording Secretary*—G. D. Beebe. *Corresponding Secretary*—D. A. Colton. *Treasurer*—L. Pratt. *Board of Censors*—Drs Ober, Small, Foster, and Vanliew. *Delegate to N. Y. State Medical Society*—G. D. Beebe.

At the evening session, the report of Dr. E. M. P. Ludlam was presented, upon "Remittent Fever." Dr. L. reported two cases, and the treatment in each.

Dr. Burt, of Lyons, Iowa, reported a case of tracheotomy for diphtheria, and presented a section of trachea, showing the incision of the windpipe and the exudation of the false membrane, resulting disastrously. He also presented a tape worm forty feet long, expelled from the stomach of a boy four years old: the remedy used in this instance was pumpkin seed tea.

Dr. Beebe also related an interesting case of tracheotomy, resulting in full recovery.

Dr. Rogers presented a foetus, supposed to be five months old, without brain or spine; and also a foetus of full age, to the back of which was attached a sack filled with a gelatinous substance. Both specimens were presented to the Museum of the College.

A discussion followed upon the use of *Lachesis*, in which Drs. Beebe, Hale, and Boyce participated.

Dr. Burt asked if in croup the false membrane extended to the cavities of the heart.

Dr. Ludlam said he had never observed anything of the kind in case of croup.

The following gentlemen were appointed to act as Chiefs of Bureaus:—*Surgery*—Dr. Beebe. *Theory and Practice*—Dr. Cooke. *Obstetrics*—Dr. R. Ludlam. *Materia Medica*—Dr. Hale. *Anatomy*—Dr. Colton. *Chemistry*—Dr. Welch. *Physiology and Pathology*—Dr. Reed.

After a vote of thanks to the President, the Convention adjourned for one year.

SOCIETY OF THE GERMAN HOMŒOPATHIC PHYSICIANS OF THE NORTHWEST.—At the last meeting of the Homœopathic physicians, the German members determined to establish a Society of *German Homœopathic Physicians of the Northwest*. Therefore they temporarily organized a committee, and nominated Dr. J. Ulrich, of Chicago, as President, and Dr. Jaeger, of Elgin, Ill., as Secretary. The said physicians passed a resolution to invite all the German and American physicians to meet in Chicago, on the 16th Nov., 1864. Four weeks before the said meeting it shall be advertised by an especial circular. All physicians who feel interested in the formation of said society, and wish to obtain more particular information respecting it, may address their enquires to Dr. Ulrich, Chicago, or Dr. Jaeger, Elgin, Ill. It will undoubtedly be an occasion of more than usual interest.

HOMŒOPATHIC PUBLICATION SOCIETY.

This Society was organized on the first day of June, 1864, in the City of Philadelphia.

Among the prominent physicians who were present at its organization, we notice the names of Hering, Wells, Lippe, Boyce, Guernsey, Dunham, H. M. Smith, Hale, and others.

Its object is to aid publishers and authors, in the effort to present the Homœopathic School with standard works on practice, etc., etc.

The Constitution and general aim of the Society, will appear hereafter.

Its Officers are: One Treasurer (Dr. H. M. Smith, of New York); two Secretaries (Dr. E. M. Hale, of Chicago, for the West; and Carrol Dunham, of New York, for the East,) and an Executive Council of *five*, who transact the main business of the Society. (Drs. Hering, Boyce, Lippe, Guernsey, and Wells).

An initiation fee of one dollar makes the physician a member for life. Those in the West, wishing to become members, can forward the fee to Dr. Hale, of Chicago.

We predict for this Society, a course of great usefulness.

HOMŒOPATHIC MEDICAL SOCIETY, OF THE COUNTY OF CAYUGA, N. Y.

The Homœopathic Medical Society of the county of Cayuga, held its fifth annual session at the Universalist church in the city of Auburn, June 22nd, 1864. Present, Drs. Robinson, Robinson, Jr., Swift, Smith, Peterson, Fellows, Strong, Gwynn, Brewster and Boyce, members. Drs. E. R. Heath, H. H. Heath, and C. Dunham, honorary members, and Drs. L. Clary, and A. R. Morgan, of Syracuse, H. M. Smith, of New York, and H. M. Paine, of Clinton.

The minutes of the last meeting were read and approved.

The election of officers being declared in order, Dr. H. Robinson was election President, Dr. Brewster Vice President, and Dr. Boyce Secretary and Treasurer. Dr. Robinson, Jr., was elected censor in place of Dr. Robinson, who resigned.

A committee was appointed to conduct the new President to the Chair, who in fulfilling this duty made a neat and pleasant speech which called out from the President a congratulatory address on taking the chair.

Reports of special committees being in order, Dr. Boyce read his closing report on catarrh.—This called out a lengthened discussion by the members and others present.

Dr. Robinson, Jr., read his promised paper on Kali hyd. in throat diseases.

The President introduced the Rev. D. K. Lee who had been invited to take a seat with the society and to give an address in the evening.

Maj. J. M. Austin being present spoke on the want of Homœopathic physicians in the army.

Drs. H. H. Heath, H. Robinson, Jr., and Rev. D. K. Lee spoke on the same subject and gave instances which had come under their observation.

The society having resumed its order of business, Dr. Swift reported several cases of disease in children which he had cured.

Dr. H. M. Smith reported progress as to the effort now being made to establish a publishing aid society.

Dr. Dunham read a paper on Pterygium.

Dr. E. R. Heath read a paper on Calendula in Erysipelas.

Dr. H. H. Heath reported a case of serious induration of the lip, cured by Sepia 900. Dr. Fincke presented a paper on "some new terms relative to Homœopathics." The communication having been read by Dr. Robinson, Jr., it was referred to a committee consisting of Drs. Boyce, Robinson and Swift.

The society took a recess to comply with an invitation from Dr. Robinson to discuss other good things prepared by the lady of the Hon. W. P. Robinson, of which it is sufficient to say, to those who know her that the feast was one of her perfect successes.

The society re-assembled at 7 p. m., and Dr. Morgan read a paper on skin diseases.

The hour having arrived for addresses, Rev. D. K. Lee delivered an address of great beauty, which showed the view taken by outsiders of our system and practice.

Dr. Clary reviewed some point of Mr. Lee's address and pointed out several misapprehensions of the gentleman.

Dr. Dunham delivered an address which was all, the many admirers of the Dr. could desire.

One great feature of the proceeding was, a history of the rise and progress of Homœopathy in Cayuga county, by Dr. Robinson, which is ordered to be published.

Mr. Lee and Dr. Dunham were requested to write out their addresses for the archives of the society.

Rev. D. K. Lee, Hon. T. M. Pomeroy, Hon. W. P. Robinson, Drs. A. R. Morgan, and L. Clary, of Syracuse, H. M. Paine, of Clinton, and H. M. Smith, of New York, were elected honorary members of the society.

Votes of thanks were given to Rev. D. K. Lee for his beautiful address; to the Universalist Society for their kind invitation to use their church; to Hon. T. M. Pomeroy, for valuable public documents; to Hon. W. P. Robinson for services rendered, and to Dr. Robinson, for the superb dinner.

Communications were read from Dr. H. D. Paine of Albany, with a clinical case reported by the same; from Dr. Lippe, of Philadelphia, with clinical cases; from Drs. Richardson, Wells and Fincke, of Brooklyn; a telegram from Dr. Sweeting of South Butler. Dr. Dunham, by request read a paper on Spasm of the Larynx.

On motion, a committee was appointed to act in conjunction with the Massachusetts Homœopathic Medical Society, in regard to the introduction of Homœopathy into the army of the United States.

Drs. Robinson, Swift and Smith were elected delegates to the Onondaga County Homœopathic Medical Society.

Drs. Robinson, Jr., Gwynn, and Brewster were elected delegates to the Oneida County Homœopathic Medical Society.

Drs. Fellows, Gwynn and Brewster were elected delegates to the Wayne County Homœopathic Medical Society.

After appointing committees for the year the society adjourned at 11 p. m. until the second Tuesday of September next.

C. W. Boyce, Secretary

HOMOEOPATHIC INFIRMARY OF PHILADELPHIA.

*Extract from Annual Report, for the year
ending April 10th, 1864.*

About five years ago, a small company of gentlemen, fully persuaded of the importance and value to the community of having a Homoeopathic Infirmary located in Philadelphia, where surgical and medical attention could be bestowed by physicians and surgeons of the Homoeopathic School of Medicine upon those who preferred and desired this mode of cure, interested themselves in forming the Institution which bears the above title. A Board of Managers was formed; medical men selected to take charge of it; and a place was opened for the prescription department, and furnished with the necessary arrangements, medicines, surgical instruments, etc., needful for commencing the work of rendering attention to such patients as could apply to their own persons, for advice and treatment at the office.

The sum total of work that has already been accomplished, sets up as follows:—About 10,000 patients have visited the Infirmary for medical and surgical advice. 23,140 prescriptions have been put up for administration to the applicants, while many hundreds of families have become believers in this humane system of medicine, through the influence and instrumentality of this organization, and have realized the truth and benefits of the great law and principle of cure: "*Similia Similibus Curantur*," discovered by Dr Samuel Hahnemann.

The first few months demonstrated that it would be impracticable to carry on with success the other departments originally contemplated, until the Institution became more widely known and more permanently established. A financial crisis, and the effect of the war, in absorbing almost the entire attention of the community in aid of our noble soldiers, subsequently operated against any attempt to collect funds for the purpose of completing the original plan of organizing the surgical, or hospital department. It is now thought prudent to take some initiative steps towards executing this much-needed object. A fund of several thousand dollars will be necessary to ensure success, and make it one of the most flourishing Homoeopathic hospitals in the country—a credit to Philadelphia, and an honor to her liberal-minded citizens.

No subject of a temporal nature is of more direct importance to every member of society, than the healing of the body when sick. All are interested in it, since those of every age, sex, and condition, are liable to accidents, and ravages of disease.

The great question that every one desires to solve is: how shall my life be preserved, and my health most easily and safely restored, when it has become impaired? The Homoeopathic system, which it is proposed to employ in this hospital, has proven, and is daily proving, by plain, incontrovertible facts, in innumerable cases, that medicines can be deprived of their poisonous and destructive properties, and yet retain their curative virtues, and thus act with a safe and more certain

healing power. No theory, or philosophical argumentation is necessary to explain the truth of this statement: that, almost every civilized community in the world is practically, to-day, proving for itself.

The system, everywhere, challenges investigation, and an impartial trial in sickness. The advocates of this school of medicine, in this city alone, are numbered by thousands, much the larger number of whom are persons of wealth and influence and it is due to that more unfortunate class, the indigent, who may believe in the doctrines of Homoeopathy, that a proper hospital should be kept in operation, in order that they may not be compelled by force of circumstances, when disease, or accident overtakes them, to go to an Allopathic Institution, and receive a mode of treatment which is repulsive to them, and in which they do not place confidence.

The amount needed to place this Institution upon a proper and successful footing, is to confer blessings upon our own people, ameliorating the condition of sick and suffering humanity right in our midst. This Infirmary has never before appealed to the public for support in its past offices; but in opening sick wards, the managers feel that they are but acting with generosity in affording the liberal minded the opportunity of bestowing their gifts upon a charitable Institution, and a deserving cause.

We must here state to the contributors, that the principle on which it was founded, and is to be conducted, is that of contracting no debt which is not provided for before it is incurred. Therefore, its operations will be extended only in proportion to the amount actually paid into the treasury. The greater the motive power in the shape of funds and material aid, that is thus given to it, the more steadily and extensively will its workings be carried on, and the larger amount of good accomplished.

Our thanks are due to the medical staff, and especially to the two attending physicians, who have gratuitously devoted one hour of every week-day to the prescription department, for the last five years, freely giving their time and advice, during the cold storms of winter, and heated days of summer, as cheerfully as in more pleasant days and seasons; thus bestowing as noble and praiseworthy a charity as those who donate large sums for benevolent purposes.

After the first year, the office of surgeon was filled by Dr Bushrod W James, who has since kindly performed all the duties required of him in attending to the surgical cases.

The Treasurer reports the prescription department in a flourishing condition, with \$230 towards its expenses the coming year. He has no funds for the Hospital department yet in hand.

Medical Staff.—O. Hering, M. D., 112 and 114 North 12th Street; D. James, M. D., 1015 Green; Richard Gardiner, M. D., 626, Spruce; J. Kitchen, M. D., 715 Spruce; Bushrod W. James, M. D., No 609 N 16th Street; David B. Posey, M. D., 1105 Arch Street.

Bushrod W. James, M. D., Surgeon in charge of the Hospital and Surgical Department.

D. B. Posey, M. D., Obstetrician in charge of Obstetric Department.

The Prescription or Medical Department, will be continued as heretofore.

Practice of Medicine.

APOCYNUM CANNABINUM.

ITS USE IN UTERINE HÆMORRHAGE.

Cases Reported by D. H. Marsden, M. D.

For about ten years, I have been in the habit of using the apocynum in arresting menorrhagia, as well as some other forms of uterine hæmorrhage.

Case 1. A lady was laboring under alarming uterine hæmorrhage. It was her regular catamenial period; the flow had been moderate for a day or two, and then suddenly set in with so much violence that she soon became too weak to be out of bed. She was about twenty-five years of age, the mother of three children; in her last labor, she had hæmorrhage previous to delivery. When I arrived at the bedside she was almost pulseless, and disposed to faint whenever she attempted to raise her head from the pillow. There was great irritability of the stomach, and vomiting. The hæmorrhage which ceased at intervals, always resumed when the vital powers rallied, and the heart resumed in some degree its wonted action. The blood was usually expelled in large clots, but sometimes was fluid. I prescribed one after the other, all the remedies laid down in the books, but with no good results. Several days had now elapsed, and I now resolved to try the Apocynum cann. I prepared some extempore tincture from the fresh root. Hastening to the bedside, I found the hæmorrhage still going on undiminished. I prescribed one drop of my tincture (of uncertain strength) every hour. Almost immediately after commencing the medicine the flow became less profuse, and regularly and rapidly declined, without a single recurrence of its violence.

Case 2. The patient was a house-keeper, about forty years of age, accustomed to hard service, and but little careful of her health. She was the mother of one child, born about fifteen years before. She had been suffering from the most exhausting menorrhagia for about six weeks, and had been taking medicine from an allopathic physician, but without benefit. I found her greatly debilitated, pulse feeble and quick, palpitations very troublesome whenever she attempted to move about the house, stomach excessively irritable. She had been obliged to leave off her occupations, and passed her time for the most part in bed, or seated on a chair by the bedside. The discharge was fluid, and still undiminished. I left Apocynum to be taken in drop doses at an interval of two hours (same tincture as used in first case). The next day she had severe vomitings. Her stomach was too irri-

table to bear the dose I had prescribed, and which was probably unnecessarily large. The discharge seemed, however, to be diminished. After giving some medicines to allay the irritability of the stomach, I again gave the hemp, a few drops in a teaspoonful of water. I believe I decreased the strength more than once, before the remedy could be borne without creating nausea. The flow, however, still continued to diminish, and in about a week from the time of my first visit, was reported to have nearly ceased. It was, of course, some time before the patient regained her strength. Upon inquiry made some months afterwards, I was informed that at one or two periods immediately subsequent, the flow was somewhat above the normal amount, but soon subsided spontaneously, and then she was as regular as is usual at her time of life.

Dr. Marsden says he could furnish many other cases in his own practice equally striking, but will only give the following, reported to him by his friend and former pupil, Dr. W. H. Cook:

"Mrs. N., aged 38 years, was taken ill in June, 1863, with uterine hæmorrhage, and was attended by an allopathic physician until the middle of December following. During this period she experienced the most frightful floodings, as she termed them, and for more than three months of the time the flow was continuous, requiring her to keep her bed for weeks together. After having hæmorrhage for several weeks, she expelled a mass of membrane (as she has since informed me), which I supposed to be the deciduous lining of the uterus. But, even this hæmorrhage continued, and in exhausting quantities—so much so, that there was not a blood-vessel perceptible upon the surface of the body, and the emaciation was extreme. She had only a cessation of a couple of weeks together, and but two or three times since the commencement in June. The flow was excessive at the time of my first visit. I saw her at 12 M., and after inquiring into the case, I left her four grs. of the 1st dec. trit. of apoc. can. (bark of the root) to be dissolved in two ounces of water, a teaspoonful to be taken every hour until the hæmorrhage should cease, or I should see her again. By 12 o'clock, midnight, the hæmorrhage had almost entirely ceased, and she left off the medicine. I then gave her other remedies to assist in recruiting her almost exhausted system, under the use of which she improved rapidly. In about two weeks the hæmorrhage set in again, when I left her the same prescription, and in less than 24 hours all was right. Since that time there has been no return, except at her catamenial periods, and then not excessive. I am now (April, 1864,) treating her with a prospect of success, for an ulcerat-

os tinctæ. I also gave the same prescription as the foregoing to another lady who had suffered with uterine hæmorrhage about three-fourths of the time for several months. Some three months have since passed, and she now reports herself entirely rid of the trouble, and regular. When I first employed the Apocynum, as above stated, I had seen no proving of that drug. In my own practice, however, I have seen enough of its pathogenesis to satisfy me that it is homœopathic to uterine hæmorrhage. On two different occasions, when I gave it to a lady past the turn of life for ascites, in doses of tincture, three or four times a day, it had not the slightest perceptible influence on that affection, but was followed in both instances, after a few days, by the return of the catamenial flow, very much in the natural manner. I also remember the case of a young girl, in whom the catamenia had ceased without any apparent cause. She still retained her health and usual appearance. After taking the medicine in pretty large doses for a few days, she was reported all "right." By the way, I would suggest that in cases where amenorrhœa depends not upon deranged health, but upon some strong revulsion diverting the female circulation into other channels, this remedy might be legitimately used, with the hope that by its primary effects it would restore the accustomed discharge, and break up the abnormal condition of things."

AMAUROSIS SUPPOSED TO BE INDUCED BY TOBACCO.

Dr. Hutchinson recently stated in a paper in the *Lancet*, that in forty cases of cerebral amaurosis, symmetrical, uncomplicated, and idiopathic, occurring in adults, he found thirty-seven were men and only three were women. That this great difference was not due to occupation, was evident from the diversity of their callings, nor was it from syphilis or intemperance, because one sex is not more exposed than the other, and in two only could it be referred to injury.

"There remained the possible influence of tobacco-smoking and of sexual excesses. The author stated strongly his conviction that the real explanation of the majority of cases of this form of amaurosis would be found in one or the other of these two."

Analysis of the thirty-seven cases occurring in males gives:

"In twenty-three of the thirty-seven cases, the patients had smoked; whilst in two it was expressly stated that they had never done so; and in twelve there was no information. In only two could it be ascertained that the patients had had constitutional syphilis. In four instances the

sufferers attributed their disease to anxiety. The disease had progressed to absolute blindness in fifteen instances; in five it appeared to have been arrested; and in most of the others it was either progressive at the last date of notes, or the patients had ceased to attend."

"With regard to the probability of sexual excesses, the author stated he had found varicocele was a frequent concomitant of this form of amaurosis. In many instances the patients were healthy, robust men, who ailed in nothing excepting the loss of sight. In no instance was there any strong reason for attributing the disease to masturbation. Even if it were proved that varicocele, wasted testes, and loss of generative function were usual concomitants of this form of amaurosis in the male, still the tobacco hypothesis would not be wholly set aside, since the two classes of symptoms might both be due to one common cause. In almost all the few cases occurring in females, there was decided disturbance of menstruation."

"Although he felt that there were great difficulties in the way of belief in the tobacco hypothesis—such, for instance, that many of those affected had smoked only quite moderately; that many had smoked for a series of years before the amaurosis supervened; that thousands smoked to great excess without suffering from amaurosis; that it was not easy to understand how the tobacco poison could act on one single nervous ganglion alone, the other parts of the nervous system escaping—still, the author added, he thought there was enough of suspicion in the clinical facts to make it the duty of ophthalmic surgeons to insist on the disuse of tobacco in all cases in which the premonitory symptoms of this disease were presented. The subject was one well worthy of prolonged investigation, and no doubt it would soon be set at rest."

For the American Homœopathic Observer.

BLOOD-LETTING AND NARCOTICS IN INSANITY.

BY E. POTTER, M. D., OF SPRINGFIELD, ILL.

When I see so much inconsistency as exists among the sons of Æsculapius, in their writings and in their practice, my soul is filled with horror. There are, however, indications of improvement breaking out occasionally, for which we must be thankful.

My mind was turned to this subject while looking over an old volume of the *Western Lancet*, vol. iv. p. 482, and taken from Drs. Steward (Practical Notes on Insanity) and Williams (Essay on Narcotics, &c., in Insanity).

Bleeding.—There is no disease, perhaps, in which the lancet of the practitioner has done

more irreparable mischief than in the treatment of mania. Earl (Report on the Bloomingdale Lunatic Asylum, Phila. Med. Ex., May 1845,) observes that blood-letting has probably confirmed more cases of insanity than it has cured. Dr. Connolly speaks in terms of equal force, affirming that the worst cases which have come under his notice, have been those which have been largely bled before admission, and in six years' experience at Hanwell, he has never seen a single case which called for general depletion.

Dr. Williams (Op. Cit., p. 80,) and Dr. Steward both appear to think *bleeding necessary in some instances*, but agree with the former writers that it is pernicious as a general remedy. Dr. Williams states that it should never be resorted to without *paramount* necessity, and then not largely. The cases in which both he and Dr. Steward think it advisable, are in the case of suppressed customary evacuations, as epistaxis, and in the critical age of females. Dr. Hunter says blood-letting is one of the greatest weakeners, as we can kill thereby, and we all know that it often produces dangerous consequences.

Narcotics.—The exhibition of this class of medicines in mania forms the subject matter of a large portion of Dr. Williams' work. We shall, therefore briefly recapitulate the results of his experience:

Opium (he says) is contra-indicated in all cases in which the restlessness is accompanied with great heat of skin, and where the nervous excitement is evidently caused by increased arterial action. It is also, he observes, contra-indicated in mania associated with paralysis, or evident cerebral disease.

Narcotics cannot enter the list of curative agents, mentioned by Dr. Williams. In regard to narcotics (the massive doses of the Allopaths), there might be enough quoted against their use to fill a large volume. I will mention one, and close.

Opium.—This universal panacea for the nervous system produces drowsiness and stupor, low muttering, delirium, stertorous breathing, cold sweats, and convulsions. The countenance is pale and contracted; the pulse frequent and irregular, till it assumes the slow, heavy beat of apoplexy. It acts through the medium of the nervous system, by rapidly diminishing the sensorial energy; or by absorption, through the circulation—in the first instance, destroying by suffocation from paralysis of the respiratory muscles, and in the second, by inducing apoplexy when determined to the brain, or paralysis and syncope, when extended to the heart.—(Croley's Toxicology.)

THERAPEUTICAL APPLICATION OF ELECTRO-GALVANISM.

The therapeutic application of electro-galvanism is also attracting considerable attention. In applying a current of electricity to the human frame, the object is to act upon the static electricity in the body. By the application, for instance of the positive pole, the corresponding electricity contained in the body is set free, and circulates in larger quantities in the nerves, the combination of the positive current from the apparatus with the negative in the body forming a neutral compound. An opposite result, of course, follows the application of the negative pole. The normal current circulating in the nerves should be increased when there is a deficiency of electricity in the system, and decreased when there is an excess. In health there exists a certain quantity of electric fluid in the nerves, which is increased or diminished by disease. In those cases which require an increase of electric activity to supply the deficiency of the current in the nerves, the negative electrode must be placed either on the spinal column, the forehead, the temples, or nape of the neck; and the positive applied to the hands, feet, or abdomen, according to the part affected, which it is necessary to bring as much as possible under the direct influence of the electric fluid. In those cases which require the quantity of electricity circulating in the nerves to be diminished, the positive pole must be placed on the back, the negative on the part affected. Chronic affections of long standing, require perseverance in the continued use of the remedy; and there are few cases but which, if they do not absolutely yield to its influence, at least derive some benefit from it. In general debility, the employment of the electric current is invariably beneficial. It must be applied chiefly to the back when the debility is general, and to, or as near as possible to, the part affected, when it is more local. Dr. FROBIEP has met with great success in treating incontinence of urine with electricity. His plan consists in introducing the electric fluid by one pole into the bladder, whilst the other is applied over the pubes. Electro-galvanic currents have been successfully applied to the bladder, where, from over distension during labor, it has lost the power of expelling its contents, requiring the daily use of the catheter. The electric current speedily restores the organ to the dominion of the will. I will refer again to this subject in my next letter.—*Reporter.*

A CASE OF MELANCHOLIA ATTONITA WITH LOSS OF SPEECH.

BY DR. H. WIGAND, OF SPRINGFIELD, OHIO.

On the 25th of July last, Miss M. SUVER, aged fifteen years, residing on a farm near London, Madison County, Ohio, was brought to me by her parents for examination. She is a girl of excellent physical and mental development; enjoyed good health from infancy, and has been of a frolicsome, happy disposition. In February, 1863, her speech began to fail, without any apparent cause, and since March she has not spoken a word. She is low spirited, weeps often &

hours, wants to be alone, and sits most of the time in a corner of the room with a sun-bonnet on her head. She makes no complaints; has to be coaxed to take food, and when asked a question answers by a nod or a shake of the head. Menses, bowels, sleep, &c., normal. All my endeavors to induce her to speak, proved fruitless. My questions "have you had a fall? do you suffer from headache?" she answered by shaking her head.

The case was a puzzling one; yet, to prevent the parents from taking her to a lunatic asylum, I gave a favorable prognosis! Prescribed Asaf., 2d. potency, 8 powders night and morning, followed by Ignatia 3d, and Pulsatilla 3, in alternation, night and morning, for six days.

August 6th. Parents called without the patient. She is no better. Admitted to her mother that she had a fall some time ago, and suffered from severe headache. Prescribed Ignatia first and Arnica—Belladonna 3 (double remedy) of each ten powders to be taken in alternation, night and morning.

August 20th, Received the following letter written by the patient:

Dr. Wigand—Well, Doctor, I think that your medicine has helped me considerable. I am getting better, and I think by a little more of your aid, I will soon be perfectly well. I can talk some and sing too. I do not have a pain in my head as often as I used to. I have taken all the medicine. Please send more.

Yours, &c., M. SUVER.

I sent her Ignatia 3, and Belladonna—Arnica 3 (double remedy) of each eight doses, to be taken as above. This prescription was the last. On December 6th she writes, that she is in perfect health, and has had no return of former symptoms since August.

CLINICAL OBSERVATIONS ON VARIOUS REMEDIES.

BY JAMES B. BELL, M. D.

PODOPH. PELT.—Usual dose, 1st dec. from Solution of Podophillin.—Indication for in gastric trouble—large quantity of flatus particularly by eructation.

In diarrhoea—absence of pain—have found this a decided indication for Pod.

In sick headache,—pain and nausea is preceded by dimness of vision—(patients call it blind headache) which passes off on accession of pain. Taken when this symptom appears it disperses the attack.

GELSEMINUM—Dose, 1st dec. dil. in water—Catarrhal Fever of any grade or form, not accom-

panied by serious local inflammation. Produces profuse perspiration in one or two hours.

ARSENATE OF QUININE—1st dec., dil, (solution)—Debility and loss of appetite without local lesions, but resulting from over work, &c., Neuralgia, principally of face and head in persons of above condition. Rheumatic pains and stiffness in joints in debilitated persons, (clergymen, clerks, &c., who are sedentary and confined.)

VALERIANATE OF ZINC—Dose 1st cent. trit.—Neuralgia of face and head, more frequently in persons of pretty good health, good color, and some flushing of face; also of whole body, resulting from taking cold; in a robust florid person much worse towards night until midnight.

PRUSSATE OF POTASH—Dose 1st dec dil—For debility, lassitude, or want of appetite, gastric symptoms in ladies affected with leucorrhoea, with or without ulceration, and with relaxation of genital organs. Has no effect upon the local but improves general symptoms.

FLUORIDE OF CALCIUM—3 cent. trit.—Am now using it with much relief in a case of goitre. Disease is rare with us, and therefore have not been able to experiment extensively with it.

Experiments upon dogs, &c., have proved it to be the agent causing goitre in the Alpine regions.

ELONGATED UVULA.

Man, æt 25. The necessity for clipping the uvula does not exist as often as the operation is performed, and it is rarely necessary to remove more than the pendulous portion. It often acquires enormous length. I saw a patient some years ago who could draw it between his teeth. This young man has been affected for some time; it produces great irritation; it consists of nothing but mucous membrane; we draw it forward by means of a pair of forceps, and divide the parts with the scissors; use a gargle of green tea made strong, for a few days.—Prof. S. D. Gross' Surgical Clinic.

Cutting the uvula may be called for in some chronic cases. Recent cases of relaxation of the pendulous portions of the palate are quickly removed by *Arum triph.* 3rd trit. and *Nux. v.* 4th dil. pellets, one dose a day of each.

PHYTOLACCA.—DR. G. C. BROWN says: "I have been experimenting a little with Phytolacca in enlarged Tonsils, and so far have found it very beneficial. In two cases they were so much enlarged as to materially interfere with deglutition, and had surface

ulcers. Were speedily reduced by the use of *Phytolacca*, a few drops of the tincture in a tumbler of water; teaspoonful every two hours. I have two cases of chronic enlargement under treatment now. Will give you the result.

[We have used the *Phytolacca* tincture, from fresh root, in cases of ulcerated sore throat with decided advantage.—Ed.]

DR. C. W. BOYCE reports that he has found the *Phytolacca* universally beneficial in diphtheritic sore throats.

Dr. Burt's notice of *Phytolacca* will be found in the March number of *OBSERVER*—and extensive provings in volume of *New Provings*, edited by Dr. Hale.

DYSPEPSIA—A correspondent writes: "I have a case of Dyspepsia on hand which baffles my skill to cure. It is that of a married female. By eating *white chalk* after every meal she can get along very comfortably; but if she omits it for a single day, she is in misery. *She has eaten ten pounds of chalk in six months.*" Who can suggest any remedy without a better knowledge of the case?

IRIS VERSICOLOR.

DR. H. M. WARREN reports a case of frontal headache in a little girl aged 11 years, worse on sitting down, studying, or sewing, but relieved by standing up or working. It was so severe, as to prevent her from attending school. She had been afflicted with it for three or four years. *Iris ver. 3d* cured it.

STICTA PULMONARIA.

DR. F. W. BATHRICK cured a case of Catarrh with *Sticta*, after failure with the ordinary remedies. He proposes trying it in the form of inhalation.

DR. B. M. PETTIT, finding that an epidemic Influenza prevailing in Cayuga County, New York, would not yield to the usual remedies, resorted to *Sticta*, and had the most gratifying success.

TIMOTHY BAKER, Esq., says, "that Mrs. Baker has been very much benefitted by *Sticta*, used for her cough, (character of cough not reported).

DR. JNO. C. FALL, says, "I have used the *Sticta Pulmonaria* with very happy effect. I wish I had time to write the effects of the remedy *in extenso*, but may in future."

Students' Department.

For American Homœopathic Observer.

A WORD TO STUDENTS.

"The moments fly—a minute's gone,
The minutes fly—an hour is run;
The day is fled—the night is here—
Thus flies a week—a month—a year."

In this world of ours at the present time, when every passing moment gives birth to new thoughts, and opens up new fields for action, holding out inducements for the willing worker (though it be in the dim distance of the future) something real—more tangibly good—for which coming generations will bless him, he must remember that these laurels can only be won—*earned* by labor and perseverance. Now-a-days, too, everything is done with speed; men rush headlong into speculation, making, or perhaps losing a fortune in a single day. To-day we have a great man before us; he has accomplished great feats in the field. To-morrow some one else occupies his place. *He* is the big gun of the day; the man of yesterday is no-where (using common language). So it is, even in the gentler and more civilized walks of life. The steamship plows the deep, carrying us over a distance at which we ourselves are surprised. Nations, too, bound together by means of the telegraph, are enabled to talk and think on the same topic, at the same moment. Should we then be unmindful of the passing moments? No! We should resolve to perform our work—to do it manfully—and the reward will come perhaps before we expect it.

When these things take place in such rapid succession; when everything is accomplished with a lightning speed; we should resolve to allow no time to run waste, but to turn all—even the odd moments, to account. Indeed, what does a life of 70 or 80 years amount to? When gone, 'tis past and seems like naught but a day that is spent. We may liken it even unto a day, in which we were aroused late in the morning, and were now about to rest our weary and aching head early in the evening, regretting that the spent day had accomplished so little.

We recall to memory the days of the past, and are shocked to find that the hours we have dawdled away are countless. But, say you, why meddle with the past? We have lost these minutes; they are gone; we cannot help it now. Grant you this? May we not look a little ahead to the rising generation? Can we not reason with, and suggest for them, in order that they may profit by the experience which a long life has gained? It is for the Students and young practitioners of the present day that I wish to plead. Let them look to these moments as they pass, for they are the future hope of our land—of our science—even Homœopathy. It is for them to take up and forward the science, of which that great man, Hahnemann, has the honor to be the founder. Indeed, would that the many students of Homœopathy that are, (not forgetting that we are always students, even from the day we are born till that in which we die) would look to that great mind, and resolve to do and labor for *similia similibus* as he did? What a future for Homœopathy! How the achievements of such followers would be blessed by generations yet unborn! Even through all time would their names be handed down as public benefactors in the cause of medicine.

The spring of the year is now dawning. The delicate leaflet is commencing to open, and ere long the many-colored flowers will deck and beautify the waste places. Once more stern Winter has had to succumb to the warming influence of the summer sun. But this calm atmosphere will not last forever. So it is with life; all passeth away. Summer, in her turn, will be swallowed up in the bleak atmosphere of Winter; and so time flies, scarce leaving a trace of what once was. It is to the young student who is in the prime of manhood I would speak. The older practitioner has usually much to think of; his place is at the bedside of the sick. To the young man of a lesser age, whose services the world has not yet learned to appreciate, I speak. Let me impress upon him the importance of employing these moments of spare time. With regard to those odd moments, an author says:

"With perseverance the very odds and ends of time may be worked up into results of the greatest moment. An hour in every day withdrawn from frivolous pursuits, would, if profitably employed, enable a person of ordinary capacity to go far towards mastering a complete science. It would make an ignorant man a well-informed man in ten years." Dr. Mason Good translated Lucretius while riding in his carriage in the streets of London, going his rounds among his patients. Dr. Darwin composed nearly all his works in the same way, while driving about in his "sulky" from house to house in the country, writing down his thoughts on little scraps of paper which he carried about him for the purpose. Dr. Burney learned French and Italian while traveling on horseback from one music pupil to another, in the course of his profession. Kirke White learned Greek while walking to and from a lawyer's office. To the employment of these invaluable fragments of time called "odd moments," Elihu Burritt attributed his first success in improvement, and not to genius, which he disclaimed.

Let these moments then be spent in the acquisition of some useful branch of knowledge. Let the student get a habit of observation, for, of all others, the physician requires to be a keen observer. One of these many fields of observation we have now opening up before us is that of Botany. The acquiring a knowledge of this beautiful and pleasing science can hardly be called study. Nothing more is it but an acquaintance with the delicate textures which beautify the highways and byways. It is a branch of knowledge which not only concerns the student in a rural sense, but also in a humane one, for it has to do with "an art whose end is the saving of human life." Let the student rise early, go into the neighboring valley, or on to adjoining hills. Let him procure the specimens where he will; study them out—their habits. If you meet a strange plant or flower, collect it carefully, find out what it is, its properties, uses, &c., remembering always that it is knowledge which costs but little, and is of much value. Bear in mind, also, that "life is short, and art is long."

"Swift as the arrow cuts its way
Through the soft, yielding air;
Or, as the sun's more subtle ray,
Or lightning's sudden glare;
Or, as an eagle to the prey,
Or shuttle through the loom—
So haste our fleeting lives away—
So pass we to the tomb."

"Be wise, then, 'Students,' while you may,
For swiftly time is flying;
The thoughtless man that laughs to-day,
To-morrow may be dying."

If, Mr. OBSERVER, what little I said you will be the means of turning even one student into the field of Nature, to recreate in the field of flowers and plants, I will consider my purpose accomplished, remembering always, "That any neglect to make ourselves thoroughly acquainted with our science becomes in us a crime." More anon.

CONTRIBUTOR BURLING.

Toronto, C. W.

Miscellany.

DIET.

BY DR. F. D. LISCOMB, PITTSBURGH, PA.

It should always be borne in mind that it takes two, generally, to effect a cure—the physician and the patient. The patient can accelerate or retard the progress of disease, in a remarkable degree, by his own acts, and by various ways, the chief of which is dieting. This is a matter of great importance with the sick.

The only use of nutrition which the system is adapted to make, is to properly nourish and support the vital forces; for this purpose simple nutrition is all that is required. In making a selection of articles which are to constitute our diet, those alone should be procured which are capable of meeting this want in the fullest, and at the same time in the most satisfactory manner.

This rule is equally adapted to the dietary regulations of the sick and well. Those articles in common use possessing purely nutritious properties, are the proper ones from which to select. The different grains, common vegetables, mature meats and fruits, furnish an abundant supply for all our real wants. All articles possessing medicinal properties, cannot fail to prove injurious, when used as food. The legitimate purpose of eating is to nourish and vitalize the system. All medicinal impressions are simply disease, no matter by what means, or under what names the entrance is obtained. The needs of the body, whatever condition it may be in, in sickness or health, together with its capacity or willingness to do the work of digestion, are the chief points to be considered in our estimate of a suitable diet. Thus, a person in sound health may

require hearty and most nutritious food, the stomach being fully capable of digesting it, and the system being comforted by the support received. In disease, the ordinary harmony of different functions is disturbed. The recuperative powers become actively engaged in repairs, which must necessarily establish an exhausting process, by drawing upon the vitality and strength.—*See.*

HOMOEOPATHY.

BY DR. F. D. LISCOMB, OF PITTSBURGH, PA.

Many great truths have been foreshadowed in error and strange hypotheses. Alchemy was an unorganized prophecy of chemistry, and lived for a time firm in the faith of the people. Astrology, a giant fallacy, which numbered its credulous adherents among the wise, was an unknown assurance of the forthcoming Astronomy. So Allopathy is the grim herald of well-proportioned and scientific Homoeopathy, which has passed from its infancy and youth, and now assumes the grand proportions of a vigorous and sturdy manhood. The scoffs, and sneers, and stinging satire endured in its earlier years, which threatened to sap and wither its young life, now fall harmless and unheeded as the gibbering nonsense of babbling fools. During the fifty years since its inception in the mind of the immortal Hahnemann, it has encircled in its triumphant march every portion of the habitable globe, and to-day numbers by thousands and tens of thousands, the good, the wise, and great, among its votaries. Already, in the exercise of its heavenly mission, it has strewn health, and happiness, and life, in glorious profusion, upon the sons and daughters of every nation and every clime. Already, by the wise adaptation of its magic powers to the great requirements of nature, in healing and restoring diseased and infirm humanity, has it become an agent and pioneer of civilisation, of most remarkable proficiency. In view of the great advantages derived from the practical application of laws embodied in this grand scheme, we feel compelled by the moral allegiance we owe to the rights of humanity, to place within the reach of the invalid, the means that will enable him to lessen the burden and shorten the period of his ills. If in this we have succeeded, and shall thereby become the means of imparting relief, and of curing the sick, our purpose will have been accomplished.—*See.*

POMORING FROM ARSENURETTED HYDROGEN.—A young chemist, attached to a manufacturing establishment in Paris, was engaged early in the morning on some experiments with aniline colors, during which

a considerable quantity of arsenuretted hydrogen gas was evolved. An hour after he was taken with headache, which after breakfast increased in intensity, accompanied with pain in the gastric region, and violent emesis. The principal symptoms were, besides coldness and stiffness of the extremities, pains, especially in the lumbar region; pulse regular (110). A pound of blood taken in the evening relieved some feverish symptoms; besides, the patient received large quantities of purgatives and diuretics. Nevertheless, the urine decreased in quantity, and on the third day ceased to appear altogether, although the diuretics were continued. The patient now sank rapidly, and died on the evening of the fourth day. Autopsy was performed only in part; the lungs were found injected with blood, and the heart with a coagulum of half fibrinous blood, which continued for a short distance from the right ventricle into the pulmonary artery. Neither the corpuscles nor the muscular fibre showed any perceptible change on examination by the microscope. There was no injection of blood into the peritoneum; the stomach contained some of the greenish mucus which had formed the greater bulk of what had been cast up; both liver and kidneys were strongly injected.—*Gazette Medicale*, No. 48.

NEW SUSPENSORY BANDAGE.—This bandage is called the "Graduated Compression" bandage, and has been patented. It was invented by Dr. Miliano of this city, and so far as can be judged of its merits from an examination of its principle, it would appear to be a decided improvement upon the old methods of managing and treating the various diseases connected with the spermatic cord, the testes, and the envelopes of those organs. It also seems well adapted to relieve the dragging and weary feeling of the testicle, often experienced from various causes, when there may be no positive disease. It is contrived so as to make equal and gentle pressure upon the whole surface of the parts it encloses, by means of drawing strings arranged in an elastic sac of network, and the pressure can be graduated at the pleasure of the wearer, by either himself or the surgeon. It is large, light, and strong, and manufactured of either linen or silk thread, is always cool, and may easily be kept in a cleanly condition. The price is moderate, and surgeons will find it a great convenience in the treatment of that kind of cases for which it is designed.—*Druggists' Circular*.

A PHYSICIAN PUNISHED AND FINED FOR DIVULGING A PATIENT'S DISEASE.—A Paris physician has been sentenced to imprisonment for one year, fined five hundred francs, and placed under

the surveillance of the police for five years, for having divulged the nature of a patient's disease, and thus injured his character. He was also condemned to pay one thousand francs damages to his patient.

RESEARCHES ON THE INFLUENCE OF CULINARY SALT AND COFFEE ON THE METAMORPHOSIS OF TISSUE.

Culinary salt, according to the researches of C. Voit, is a powerful stimulator of the metamorphosis of tissue; it increases, by means of its physical properties, the capillary circulation of fluids in the organism; it increases the oxidation of albumen, and through this the quantity of urea excreted. Culinary salt is also a true diuretic. In order to excrete the salt from the body, water is required; this water passes always through the kidneys (the only channel for the excretion of culinary salt in the dog), and is, if the supply of water from without is limited, abstracted from the tissues.

Voit's experiments with *coffee* on a dog led to the inference that coffee does not, as is usually assumed, diminish the metamorphosis of nitrogenous tissue, and the excretion of urea, but, on the contrary, rather increases these processes. On the whole, the dog appeared to be more lively after the use of the coffee. The author also made experiments with *Caffein* on frogs, and found it to cause at first, increased irritability of the nervous system, a tendency to reflex movements and tetanic convulsions; later, however, phenomena of paralysis. The pupil becomes dilated; the capillary vessels are filled with blood; the heart's contractions are at first increased; later, reduced in frequency; they are arrested during the tetanic paroxysms. The author attributes the principal effects of coffee to its action on the nervous system—not to its influence on the tissue-change. The nervous system being rendered more susceptible, the same exciting cause produces a greater effect. Coffee thus refreshes, Voit thinks, the fatigued body, renders the lassitude less perceptible, and in this manner enables us to endure the prolonged exertion. The experiments on the influence of *bodily exercise* (tread wheel) on the tissue-change, in the well-known dog, lead to the unexpected result, that the excretion of urea was not at all, or very slightly, increased by bodily labor. Voit, infers, therefore, that muscular action does not cause increased decomposition of albuminous substances, while it is accompanied with a greater consumption of fat. As the decomposition of albumen is not the source of the production of force, connected with muscular contraction, Voit is inclined to look for it in the development of electricity.—*Brit. and For. Med. and Surg. Journal*.

A M E R I C A N Homœopathic Observer.

"Similia Similibus Curantur."

"I present you with a Truth long sought for, a principle of eternal nature, I appeal to existing facts alone to convince you; and when a conscientious and complete course of study shall crown your researches with success, then, as I have done, bless Providence for the immense benefaction he has allowed to descend upon the earth through my humble agency, for I have been but a feeble instrument of the Omnipotence, before which we all bow in humility."
HAHNEMANN.

VOL. I.]

DETROIT, AUGUST, 1864.

[No. 8

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Reviews & Book Notices.

NEW REMEDIES:

Their pathogenetic effects and therapeutic application in homœopathic practice, by Edwin M. Hale, M. D. Published by E. A. Lodge, at Detroit Homœopathic Pharmacy. 1 vo. 8 vo., bound in strong cloth, including clinical index, 448 pages. Price \$2.50.

After an unexpected delay we are happy to announce that this work is ready for delivery. When the prospectus was issued it was proposed to print 350 pages of the size

of Hahnemann's *Materia Medica*, instead of this we have issued about 100 pages more, of a larger size, and have included a clinical index which will be found of daily value to every practising physician. We do not feel at all disposed to apologize for the delay as the work now includes several provings which could not have been inserted if our printers had been enabled to get the work out at the time first advertised. The additional 100 pages makes the book cost fifty cents more than the original subscription price, \$2. Our subscribers who receive the work by mail will please remit also the postage which we prepay for them.

FAMILY HOMŒOPATHY.

By John Ellis, M. D., Professor of the Theory and Practice of Medicine, etc, etc. vol. 12 mo. Cloth, 404 pages. Price \$1.75. To physicians, \$15 per dozen. Published by E. A. Lodge, Detroit Homœopathic Pharmacy.

While favoring the high potencies in his general practice, Prof. Ellis recommends the lower attenuations in this book for families. It will be found a very reliable manual, and can be circulated by physicians among their patrons with great advantage. It is a good companion to the authors hygienic work, "*Avoidable causes of disease.*"

THE AMERICAN HOMŒOPATHIST.

A monthly Journal of Health and rational medicine. Charles Cropper, M. D., Editor and Publisher, Cincinnati. Vol. 1 No. 1, July 1864, \$1 per year.

A very well appearing octavo of 16 pages with a neat cover, well printed, and giving

promise of great usefulness as a homoeopathic journal for the people. We wish Dr Cropper every success in his laudable undertaking.

Resolutions of the General Assembly incorporating the CONNECTICUT HOMŒOPATHIC MEDICAL SOCIETY, the organization of said society, etc.

We are indebted to E. T. Foote, M. D., for a copy of this document, also for report relating to registration of Births, Marriages and Deaths (State Connecticut Genl. Ass. May session, 1864.)

NORTH AMER. JOURNAL OF HOMŒOPATHY.

The thirteenth volume commences with the August number 1864. The subscription price raised by the publisher to \$4 in advance. Our friends who wish to receive this standard journal along with the A. Hom. Observer can depend on getting both regularly from this office, for \$4.50 per annum in advance. Back numbers or back vols. supplied on publishers terms.

AMERICAN HOMŒOPATHIC REVIEW.

Vol. 5 commenced with July number. It contains an interesting retrospect by Carroll Dunham, M. D., and several valuable articles by Drs. Hoppe, Lippe, Clary, Hering and Allen. Price \$3 per annum. We will receive subscriptions for this and the Observer at \$3.50. Back numbers or back vols. supplied at regular price.

MONTHLY HOMŒOPATHIC REVIEW.

Edited by John Ryan, M. D. 63 octavo pages each month. 768 pages per year.

We receive this Journal from England by the 20th of each month, and will furnish, notwithstanding present gold premium (150 per cent.) at \$5 per year, or with Observer at \$5.50. Sample numbers at 50 cents. Back numbers or back volumes supplied

MEDICAL DIAGNOSIS.

With special reference to practical medicine. A guide to the knowledge and discrimination of diseases, by J. M. DeCosta, M. D., Lecturer in Clinical Medicine to the Philadelphia Hospital. With wood engravings. 1864. 690 octavo pages. \$5.

This is an eminently practical work. Diseased states are described according to their

marked symptoms, and not by the usual classification. The engravings are new and not reprints of old illustrations.

Practice of Medicine.

MEDICAL ELECTRICITY.

Read before the Michigan Homœopathic Institute, June 8th, 1864.

BY DR. E. L. ROBERTS.

Electricity, like other means of cure, can truthfully say "save me from my friends." Although it has been found very useful, it is but little understood. Its indiscriminate use without reference to any grand, fundamental law governing its administration, has led to an unjust prejudice against this important means of cure. Electricity and vitality are intimately related—hence, this greatest force of nature, viz, Electricity, holding as it does such varied and powerful influence over life, health and disease, in connection with other rational medicine, does assuredly command our more attentive study.

Let us consider for a few moments some of the many thousand effects which Electricity is capable of producing on the human organization. M. Bondin mentions the case of a group of laborers struck by lightning, where four were killed, and six were badly wounded. One had on a goat-skin coat and on his body there were found the most frightful mutilations, and in three hours after, his body was as rigid as a mass of stone. Again, he gives the case of a person having been struck by lightning, who manifested no appearance of life until an hour and a quarter afterward, when he entirely recovered his consciousness together with undiminished intellect, but leaving his sight totally destroyed. The skin and muscular sensations were obtused, and his movements were very difficult. The various parts of his body no longer seemed to belong to him, but his taste, hearing, and smell were exquisitely augmented. His rest was poor and his days were heavy. The general prostration was great, and this was attended with headache. Indeed there was a veritable revolution of the general mus-

cular forces, and the body in a degree was only a dead mass, mostly obeying the laws of gravity. He was burned and bruised, and these wounds did not heal; besides, he suffered from a succession of cramps. At the end of a month, the pulse was low, frequent and irregular.

We may enumerate as quite a frequent occurrence from the effects of lightning, amebrosis, deafness, roaring in the ears, paralysis and rheumatism. Thus we see, in some cases where persons have been struck by lightning, the muscles have been found rigid as if solid, while others were as remarkably flaccid. But as it is not my purpose to dwell at any considerable length on the effects of this powerful agent, suffice it to say, Electricity can produce thousands of effects,—it is heat, light, galvanism, magnetism and chemical action, or it is convertible into them. It has been truthfully said to be a "thousand remedies in one." But in its administration we have suffered our minds to be tied down by empirical routine. We seem to be content in the employment of this wonderful agent, to follow in the footprints of others, and can assign no better reason for our employment of Electricity than that it has been used in *such and such* cases, and oft times with success.

The kind of instrument required in the cure of any particular disease is not considered by many. But supposing that all that is necessary is to give their patient a shock; they proceed at once to open upon him with their battery, and it matters not which end of the current is applied, only that the patient gets shocked. The following is an illustration: During the life of Golding Bird, Professor of Materia Medica in Guy's Hospital, London, a discussion and a discrepancy arose in regard to Electro-Magnetism in uterine hemorrhages, Golding Bird asserting that it never failed to check and arrest the hemorrhage. Dr. Simpson, of Edinburgh, on the contrary, expressed his opinion of the inefficiency of the electric current in such cases. This discrepancy Golding Bird soon reconciled by showing that it arose from the fact that one used an instrument producing entirely

different physiological effects upon the system than the other and successful one.

Gentlemen, there is but one true method of studying the therapeutic character of a drug or remedial agent, you must in the first place ascertain its pure physiological effect upon the human system, and by these effects determine its use in the treatment of corresponding diseases. When we take into consideration the good results that accrue from the use of Electricity, by those wholly unacquainted with its relation to the system, either in health or disease, what grand results, in a medical point of view, may we not expect from an agent so potent, when used in accordance with our beautiful law of cure *similia similibus curantur*.

Gentlemen, at some future meeting of our Institute, I may give you some general principles to guide you in the proper method of using this powerful agent in the cure of all curable diseases.

For the American Homœopathic Observer.

MEDICAL ELECTRICITY.

BY DR. W. J. CALVERT.

THERAPEUTICAL APPLICATION (CLINICAL EXPERIENCE).—As the Philosophical and chemical qualities have been presented from time to time, and not many cases from clinical observation, (which, I think, is the most useful), and with a view to assist the profession and alleviate suffering humanity. I will report some cases.

I have had quite an extensive experience in electric treatment for several years, with most of the electric machines, with varied success. Dr. Palmer's Voltaic Pocket Battery, in my experience, is the most suitable, both in medical and practical value, it is cheap, and compact, can always be used at a moments warning and far supercedes all of the cumbersome electric and magneto-electric machines. The chemical power is sufficient for any chemical operation that should be practiced on the human body, it will dissolve urinary calculi, neutralize the poison of phagedenic ulcers, destroy cancerous formations, and cure open sloughing ulcers and eliminate syphilitic virus. I have cured cases where other reme-

dies seemed to fail. Cataracts have been arrested by its application, and all forms of Ophthalmia, treated and cured where medication seemed of no avail. A few cases will help to illustrate and show its value.

Case 1st.—Amaurosis, of three years standing, produced by excessive visual application in study and looking at fine objects, but most by dissecting in a damp, cold cellar, with a dim light. My own case. It had resisted the skill of three able Allopathic physicians,¹ and had been given up as hopeless. Dr. Palmer having just completed his discovery assured me that it would help. **a** he thought, cure my eyes. I, with very little hope or faith, tried the electric treatment. I had been obliged to give up all study and business for almost two years before I saw Dr. Palmer, after applying it several times a gleam of hope, accompanied by returning vision, appeared in my woe-begone horizon; and to my supreme joy and that of my family and friends, in sixty days my sight was as good as ever it had been, and still continues in defiance of the long hours of study and practice for the past four years.

The mode of treatment was to apply the positive pole to the eye, the negative to the first cervical vertebra as near the course of the arterial half of the optic nerves as possible for from one to two minutes every other day, and only one eye at a time; and every other day a general tonic treatment as practiced by Dr. Palmer. (*See his book*).

Case 2d.—CEREBRAL APPOPEXY.—A child eight years old, youngest daughter of Dr. A. Gray, of Dexter, Mich., caused by a severe relapse of whooping cough. She had been for eight or ten days completely deranged, uttering the most maniacal and heart-rending cries ever heard for several days, this was followed by complete hemiplegia, loss of memory and speech, she had to re-learn all that she had previously known parents, sisters, friends and letters. After six days she was seized with convulsions, with foaming at the mouth, rolling of the eyes, a choking sensation, stoppage of the circulation, and for six hours was pronounced beyond recovery by several physicians and friends. From a large collection of mucus, and vascular engorgement of the

paralyzed lung, she was completely asphyxiated and was kept alive by electric treatment and artificial respiration. She completely recovered in three months. Mode of treatment. Polarize the nerves, distributed to the muscles that are paralyzed. Positive on spine and negative to the extremity of the nerves and to the feet, ten to twenty minutes at a time, three times per diem.

HEMICRANIA AND FACIAL NEURALGIA.—

Case 3d.—Mrs. C., aged thirty; subject to periodical attacks of this dreaded disease, had been suffering for twelve days. She had been steamed, purged and mercurialized, etc., but grew worse till the paroxysms produced spasms, which came on about every thirty minutes, and continued for fifteen or twenty minutes between the paroxysms, she was completely exhausted. I was called at 1 o'clock A. M. arrived about 3 A. M., found her as described, in a paroxysm; eyes protruded with terrible look; she would leap out of bed, and run around the room. Gave her one application and relieved the pain, which did not return for four hours, then treated her before leaving and completely removed the pain, and with the indicated homœopathic remedies, she recovered. Six months has elapsed and no return of the disease. On my return call, I was met by such an overflow of thanks accompanied by the greenbacks, as full rewarded me for leaving my comfortable quarters, wife and baby, to face a driving storm of sleet and rain, which is the lot of a Michigan physician. But I had achieved a victory over the old stupid conservatives and converted a family to the pure practice of Homœopathy. I consider galvanism homœopathic in its action; it will produce that which it will cure. At some future time I will report a case of severe narcotic poisoning with Digitalis, saved when other means failed; and could report hundreds of cases such as inflammatory rheumatism, catarrh, pulmonary affections periodical sick-headaches, paralysis of eyelids, and others forms of paralysis, strangury, amenorrhœa dysmenorrhœa, etc.

MEDICAL ELECTRICITY.

BY J. B. HUNT, M. D.

I have had some experience in the use of this great therapeutic agent, having applied it *exclusively* in the treatment of different forms of disease for nearly two years, previous to my adoption of the Homœopathic system of Medicine, and *since* then as an adjunct in very many cases. Indeed, I should hardly know how to get along without it, and I hail with satisfaction any move upon the part of members of our profession to investigate this *mysterious* subject. I believe with the celebrated Dr. Channing, that Electricity is entering year by year extensively into medical practice and is to become one of the most universal and important of therapeutic agents. What we most need is a *plain, practical* work on the application of Electricity in each particular form of disease for which it is indicated. We read Golding Bird, Channing, Garratt, and other authors on this subject, and yet we are as ignorant in regard to any general *law* to guide us in its application to *particular* cases as when we began. They tell us that in the use of the different *poles* of the "Battery" a different physiological effect is produced. This is *true*, and fact makes it the more important that we understand not only the *nature* of this difference, but how to avail ourselves of the benefits of the one, and avoid the injuries of the other; for if the physiological effect of the positive is essentially different from that of the negative, then the *pathological* condition which would indicate the use of the one would *contra-indicate* the use of the other. Some *directions* as to what kind of Electricity to use, when, where and *how* to apply it is what is wanting. I could give you many very striking and interesting "clinical cases," treated and *cured* by Electricity, but will only add, that if you desire the success of this branch of our healing art, do not encourage the use of the *Magneto* machines. I will give you the reasons if you desire it. For *general* use, the induced current from some ELECTRO-Magnetic machines is undoubtedly the best. I prefer Dr. Page's "Electro-pathic instrument," or "Hall's Compound Constant Battery."

UTERINE HEMORRHAGE.

BY S. W. GREEN, M. D.

There is an occasional case of uterine hemorrhage, after premature labor or abortion, where the hazard of life is so great that means to arrest it speedily is necessary to the safety of the patient. The tampon is of course used with excellent success, in preventing the flow until remedial agents can be brought to bear. Yet this course will not meet the exigences where immediate effects are required. There often exists a lax and atonic condition of the pelvic and uterine circulation, it requires some means to effect an almost instantaneous contraction of the blood vessels of the parts with a continuous effect, until a tonic condition can be had by proper remedies. This effect can be had by the application of *cold* water over the region of the uterus, by compress or pouring. If the case is not extremely urgent, a dripping compress changed often, will answer all purposes. But if your patient is rapidly sinking, moderate pouring upon a thin covering at proper intervals will arrest the flow, when at the same time, remedies especially indicated must be administered.

[The most efficient remedies are Senecio, Trillium, Erigeron, Hamamelis and Crocus. —Ed.]

STICTA IN CATARRH.

Dr. C. W. Boyce writes, July 16th, 1864: —"Dr. Lodge, — *Dear Sir*: — In the July number of your 'Observer,' I notice a reference to Sticta, in Catarrh. This remedy has been of the greatest value in this vicinity, in that troublesome disease. During the past spring, there was an epidemic influenza which affected nearly every one, and which produced symptoms quite unusual here. These consisted of an extensive dryness of the nasal mucous membrane, which became painful. The secretions were so quickly dried, that they were discharged after great effort, in form as hard as scabs; the soft palate felt like dried leather; deglutition became painful from the same cause. Often, the catarrh extended to the chest, leaving an irritation lasting for weeks. There was, usually, a distinct exacerbation in the latter part of the day, and fore part of the night; the morning hours were nearly free from distress. *Sticta* was the only remedy that relieved."

ULCER ON CORNEA &c., CURED BY SULPHUR 30TH.

BY G. H. PARKHURST, M. D.

Oct. 10.—Girl aged 12 years; ulcer on cornea, with conjunctivitis, photophobia and lachrymation. The other eye sympathises somewhat; is "weak." Has been affected six or eight months and treated by all the best allopathic physicians in the village of Elmira, N. Y., (some four or five) with no benefit.

Gave Sulphur 30th, one dose, Saccharum alb. night and morning. (Sach. Lactis too costly) for three days; then Sulphur 30th again; then again Sach. album as before. Also local application, twice daily, to both eyes of Calendula 1 part, Aqua 9 parts.

Oct. 17th.—Much better. Continued treatment.

Oct. 24th.—Still improving. Continued.

Oct. 31st.—Nearly well. Continued.

Saw her months after. Sight from both eyes good. Small cicatrix from the ulcer on cornea. Sight a very little dim.

BAUNSCHEIDTISMUS.

DR. HALL reports:—The article in a recent number of the Observer, on Baunscheidtism, should interest the profession generally. My partner, Dr. Hoffmann, received some months since, from Baunschiedt his instruments and oil, and has applied them with remarkable success in many of the most painful, as well as some of the most desperate cases of sickness we ever met with. Some of these could not have recovered from any other known remedies or treatment. Its rallying powers where the vitality of the system is almost extinct, as we have witnessed in typhoid pneumonia, congestion of the lungs, diphtheria, neuralgia, have been astonishing. Its effects are really magical in restoring immediate warmth and circulation to the surface is decidedly cadaverous conditions.

CONSULTATIONS.

We continue to receive applications for advice, by letter, in particular cases. We cheerfully attend to all these where the customary fee (\$5) is enclosed.

Surgery.

ACUTE SYNOVITIS, (WHITE SWELLING:)

BY E. H. DRAKE, M. D.

Read before the Michigan Homœopathic Institute, at the Annual meeting, June 8th, 1864.

The subject, a child some 7 months old, has had some enlargement of a lymphatic gland in the neck for some weeks, for which Mercurius 6th and Calcarea Carb. 6th were given, night and morning. "Has always had a slight cough," but otherwise well. Seems fat and healthy. In about two weeks after the above prescription, was called to see the child,—found it more feverish with slight increase of cough. Prescribed Aconite 3rd and Byronia 3rd. This was on the 12th day of April. On the 14th. rather more fever, cough not increased; but cries on being moved, particularly on raising the hips; the child not being able to indicate the seat of pain, am not able to say definitely what is the trouble. Does not seem to be sufficient disease of the viscera of the thorax, to account for the pain produced by motion.

April 15th. Symptoms rather aggravated, except the cough, which seems better, "slept quite well." On examining the inferior extremities, the right knee was found to be somewhat swollen, and sufficiently sensitive to pressure, to clearly indicate that it was the seat of the disease. The case was at once diagnosed as Acute Synovitis, and most probably of a scrofulous character. No injury had been sustained and no other cause could be assigned. On looking for the enlarged cervical gland, it was found to have disappeared, and the question was anxiously asked "if the disease had gone to the knee?" This could not be easily answered, *positively*. Yet a fear was expressed that such might be the case. Having seen a number of these cases, and knowing their tedious, if not dangerous nature, much apprehension was felt for the future integrity of the joint, to say nothing of the life of the little sufferer. Prescribed Aconite 3rd and Silicia 3rd. Apply cold compresses of a very weak decoction of Arnica flowers.

April 17th and 18th. More fever, restless, and great pain in moving. Knee semi-flexed, and evidently swelling, being sensitive to pressure. Swelling mostly on the inside of the knee. Gave Bryonia 1st in alteration with Silicia. Use a cold compress of a decoction of Calendula.

April 26th. Knee much more swollen upon the inside and evident fluctuation on the inner edge of the patella, at which point an opening was made which gave exit to about two ounces of pus of a yellowish color, interspersed with flocculi of a curdy appearance. Continue Bryonia and Silicia with the cold compresses. There has been constantly much heat of the joint.

April 28th. Patient has been much easier; swelling much less. During the 24 hours after the operation pus had continued to discharge, but had now ceased. From this time up to May 2d, the patient seemed to be doing well, but for the last 24 hours there was more fever, soreness and heat, with slight increase of swelling. The opening had closed. A probe was gently pressed within the synovial membrane, severing the recent adhesions, when a small quantity of sero-purulent matter discharged. From this time on to May 12th, the wound was kept open by daily probing to afford a free exit to any secretion that might take place, when all tenderness having subsided, together with much of the enlargement, the opening was allowed to close. After the second opening the patient took Iodide of Ammonium, 1st trituration 5 grs., in half a glass of water, a teaspoonful every two hours during the day.

At this time, May 17th, the knee is doing well, the patient uses it freely; can be handled and the leg straightened without causing pain, though it is somewhat larger than the other. In fact it seems quite well except the slight enlargement. Continue the Ammonium less frequently. I attribute the rapid recovery in this case to the early opening, for had the purulent secretion been allowed to remain it would have continued to increase, producing some constitutional irritation, by the distention of the synovial membrane, which oftentimes becomes very great; for the fibro-serous mem-

branes resist most obstinately the ulcerative process.

A case came under my observation in this city, last fall, in which the patient had an attack of acute inflammation of the synovial membrane of the knee joint, some three months previously, pus had undoubtedly been formed at an early period, and had gone on accumulating until the membrane had become enormously distended, and the patient died from the irritative-fever thereby induced. This case had been treated by a physician who prides himself on not being a Surgeon. He undoubtedly expected to produce absorption by internal remedies and poultices externally. But I should quite as soon expect to storm and take Richmond with a pop-gun, as to produce the removal of a secretion of pus in a joint by the internal administration of either little or big pills. The only remedy is the knife, and the sooner it is used after fluctuation is detected, or we can satisfy ourselves that pus exists, the better. In using the knife in these cases, as in all others, caution united with firmness is necessary. We must cut carefully, but deep enough to reach the matter. The hand must be gentle and sensitive, yet not fearful. But some constitutional disturbance is not the only thing to be feared from allowing the joint to become disturbed by its accumulating purulent secretion, but the membrane itself becomes thickened, pulpy, and highly vascular, granulation forms on its surface, and project like fringes into the cavity of the joint, the cartilages become rapidly involved, ulcerate, and are finally absorbed. And if the constitution does not give way and death close the scene, Ankylosis is the sure result. While I would advise the early and free opening of the joint in cases where pus exists, I would equally deprecate it when the cause of the distention is serum. This is amenable to absorption. But if we have any doubt about the character of the contained fluid, we may easily satisfy ourselves by puncturing the joint with the grooved needle and observing the quality of the fluid that exudes. If it be serous and the joint much distended, we may make two or

three punctures with the needle, and by means of a cupping-glass safely relieve the joint, and having relieved the distended membrane we shall be much more likely to effect the absorption of the remainder of the fluid.

According to Druitt, "If after acute or chronic inflammation, a joint becomes very much distended, and there is constant pain, unmitigated by remedies, and considerable constitutional excitement, suppuration of the synovial membrane may be fairly suspected." But we had better be certain that pus exists before making an incision. Our prognosis in acute synovitis must be grounded by the length of time the disease has existed; the degree of constitutional disturbance, and the degree of distention. In recent cases, and in constitutions not too strongly scrofulous, it may be favorable, but if there be a scrofulous taint, and the disease has been going on till the joint has considerably distended, it should be guarded.

Case 2d. Acute synovitis from wound of the joint. Richard B——, while using a drawing-knife, wounded the knee joint over the head of the Tibia, the knife penetrating the head of the bone. As the wound seemed slight, no attention was paid to it further than to apply a bandage, and the next day he started on a hunt, was absent two days, during which time he got wet and thought he had taken a severe cold, which "had settled in the knee." The patient was found with a high grade of fever, pulse full and strong, 112; knee much swollen; very sensitive and exceedingly painful. The inflammation had been going on three days, during which time the patient had taken a physic of Epsom Salts, and applied some herb poultices, but without any relief to his sufferings.

R. Aconite tincture 5 drops in half a glass of water, a teaspoonful every hour; apply externally cloths wrung out of a decoction of Arnica flowers, after it has become cold, renew frequently. This treatment was continued for one week, with a rapid subsidence of the disease from the first. The patient stated that he commenced getting better after taking the first dose. At the

expiration of the week, all signs of disease had disappeared, the patient could bear some weight on that leg, and could flex and extend it without pain. From this time on the recovery of the use of the leg was rapid, so that at the end of three weeks the joint was strong as ever.

Case 3d. Acute Inflammation of the conjoined tendon of the vastus externus and internus from a wound made with a hand axe, the corner penetrating the tendon about two inches above the patella. In this case, the wound being slight, not more than one and a half inches externally, and bleeding but little, scarcely any attention was paid to it, the young man keeping about on his feet for nearly two days, when, in consequence of the severe pain, he "concluded to lay still a day or two." But during the night of the second day the pain became very severe, extending up the thigh to the body. Early the next morning I was sent for; found the patient suffering very severely; not much swelling of the part, but acutely sensitive in the vicinity of the wound, pulse 120 and tense, much thirst and complete inability of motion. Prescribed Aconite 1st, 10 drops in half a glass of water, a teaspoonful every hour, kept the leg, over the part of injury, wet with a dilute tincture of Arnica. After two days, there being but little abatement of symptoms, the Aconite was discontinued, and Rhus tox. 2nd. in alternation with tincture Calendula, 5 drops in half a glass of water, apply externally cloths wet in a decoction of Calendula flowers, of such temperature as is most agreeable to the patient; under the use of these remedies the inflammation rapidly abated, but little suppuration ensued, and at the expiration of ten days the patient was able to walk with a cane. The recovery was complete. In this case the Calendula produced a much better effect than the Arnica, and to its action I attributed the subsidence of the inflammatory action without extensive suppuration, for it is well known that Calendula, when applied to lacerated or incised wounds, prevents that profuse suppuration which is so much to be feared, especially in lacerated wounds. If properly used in our army

practice, those cases of profuse suppuration, so numerous, and often fatal, would be wholly prevented. It would also prevent the patients from being obliged to be kept half drunk on whiskey, under the absurd idea of keeping up their strength. But in respect to the conceited ignorance of the old school or "regular Surgeons," the words of the poet force themselves strongly upon the mind.

"Of all the causes that conspire to blind
Man's erring judgment and misguide the mind,
What the weak head with strongest bias rules
Is pride."

Pride of opinion, and a false pride of professional dignity, prevents the use in the great army of this free and liberal government, of the best remedy in the whole *Materia Medica* in gun-shot and lacerated wounds, and also in amputations, and thus causes much suffering and many deaths that might be prevented.

These cases have been given, not so much to illustrate the Homœopathic practice, but because the treatment was so much more successful than that advised by Allopathists, and followed by the writer in similar cases when practicing that system (if system it can be called). In Indiana I there had occasion to treat several cases of Traumatic Synovitis of the knee joint which were severe and protracted two and three months before the use of the joint was restored, notwithstanding the best means were made use of, that were known to the Fraternity. In fact the cases were considered to have done well, and the patient fortunate in escaping amputation or Anchylosis.

OSTEO-SARCOMA.

Report by Smith Rogers, M. D., made to the Michigan Homœopathic Institute, June 8th, 1864.

Some four years ago I was called to see a Mrs. H., of Penfield, Mich. I found her suffering and very much reduced and emaciated. Three years previously, while milking a cow, she received a kick on the left arm, just above the wrist joint. In a short time after the arm commenced to pain her, and the bone to enlarge, its structure became altered, from a deposit of flesh-like matter,

mingling with its substance. The changes thus produced resulted from the inflammation excited by the injury. The word osteo-sarcoma has also been applied to tumors in any part that seem to be of a blended osseous and fleshy consistency.

In this case the bone enlarged as the disease progressed, and the internal structure changed from the proper cancelli, or reticulated tissue, to a brownish, fleshy mass, producing true "Osteo-sarcoma."

The bone enlarged to the enormous size of seventeen inches, only four inches above the wrist joint. As this morbid formation increased the parts of bone extended and became very thin; in some places giving way entirely; fungus then filled up the crevice; the symptoms at the beginning were acute pain in the part injured; the swelling becoming hard and elastic and the pain more dull. At a still later period, acute lancinating pain returned, severe constitutional symptoms set in, the tumor became fluctuating, and in consequence of loose pieces of bone floating in it crepitus could be felt on handling; eventually the integument burst and a large fungus growth sprouted out with a bloody discharge.

If I had been called to the patient in the early stage of the disease of acute inflammation, before pus had formed, I think, by putting the patient on proper remedies, as they were indicated, before the bones became necrosed, I could have saved the limb.

When a bone becomes necrosed the surrounding parts throw out lymph; this is changed to cartilage, and the cartilage to provisional bone, by deposition in it of osseous matter, as in mortification of soft parts, a line of demarcation is found separating the dead from the living tissue. The living bone throws out granulations, while the necrosed bone or sequestrum is gradually dissolved and absorbed, or discharged in the form of pus through the opening which nature generally provides.

Pus, from diseased bone may be easily distinguished by any one who has had any *sensible* experience of it; its very offensive odor is quite characteristic. Touch is, however, a better test of diseased bone than smell; apply the finger or probe wherever possible. If the surface of the bone be felt

rough or uneven, with loose pieces, or looks either much whiter or darker than natural the case is clear; if the suspected part of the bone can not be reached, by subjecting the pus to a chemical examination for phosphate of lime, it will be easily determined whether the pus is from diseased bone or not. In healthy pus there is scarcely a trace of this phosphate, but in that from bone an appreciable quantity will be found in an ounce or more.

In treatment assist nature and avoid all unnecessary interference. Here, as everywhere, remove causes and obstructions and let nature proceed with her recuperative work when she is doing well, and let well enough alone. The patient should be kept quiet, the limb in a horizontal position, and the diet regulated according as the constitutional powers are vigorous or enfeebled. If the inflammation is of an erysipelatous character, Belladonna will be beneficial. Mangan. acet. is valuable in periostitis and inflammation of the joints; also Phos. acid for periostitis, if the disease is located on the shin; or superficial bones; Mezereum, Stillingia sylvatica, and Nitric acid for caries of the nasal as well as the skull bones. Phosphorus for persons with impoverished vitality. It exerts a particular influence over fibrin. Silicia is perhaps more useful in diseases of the bones than any other remedy; it seems to exert a specific influence both over the separation of the sequestrum from the living bone and the state that follows when it is loose, and there is a copious discharge of pus and ichor from the fistulous opening. It controls the nervous excitement which prevents sleep. If called too late for this or for arresting the inflammation, pus having formed, the limb continuing to swell, if there is not an opening apply an issue with caustic potash over the most prominent part of the tumor so as to cause an opening in the center of the diseased mass as soon as possible. Having thus made an exit for the pus wash out the cavity freely with strong soap suds and treat the same as for a cancer with similar symptoms.

Amputation should not be delayed too long if the disease does not yield and the patient is sinking. Operate if possible,

having a healthy joint, between the diseased portion and the point of amputation. My reasons for doing this is, that not unfrequently where the amputation is performed on the same bone the disease re-appears — Hastings, in his practice of surgery, after quoting Gibson's language adds, respecting amputation, "but unfortunately, this does not always prove successful, for the disease has re-appeared on the stump after the operation."

I might continue these quotations from old school authority, to a great extent, but I deem it unnecessary, for there is so much unanimity among them on the treatment of this disease that it would be sheer tautology, though they do not exactly copy each others words.

In Mrs. H's case I amputated the arm above the elbow, and dressed it with calendula. In six weeks from the time of the operation it was entirely well. Her health very much improved, and her health has been good from that time to this, having no symptoms, or any appearance of any return of the disease, it may not be incongruous to state that at the time I amputated the arm this woman had twins six months old. She was so reduced that the old school physician dare not amputate, he said she could not live. I gave her Chloroform one part, Ether two parts, which produced complete anaesthesia. In thirty minutes from the time she commenced to take the chloroform the limb was off, dressed, and the patient sitting up in her chair eating some toast and drinking a cup of tea.

Probing.

For the American Homœopathic Observer.

CISTUS CANADENSIS.

BY E. M. HALB, M. D.

We have a good proving of this plant, (Symtomen Codex) and Dr Hempel, and others, give some excellent accounts of its virtues in obstinate scrofulous affections. It is a plant indigenous to the United States, growing in dry sandy soils. The whole plant is officinal. The leaves and stems are covered with a white down, and it is said that in the months of November

and December, these plants send out near the root, broad, thin, curved *ice crystals*, about an inch in breadth, which wilt in the day, and are renewed in the morning.

Dr. Comstock, of St. Louis, sent me the following statement of its effects in chronic diarrhoea. He supposed it was included among the "New Remedies," but as we have published proving, it seems proper to publish it in this place, that it may reach the profession as an addition to our clinical knowledge of the curative power of *Cistus Canadensis*:

DEAR DOCTOR: In the work upon New Remedies, which I see you intend publishing soon, you have among your list (I speak from memory,) Frost-weed, (*Cistus Canadensis*). I wish to call your attention to the virtues of this plant as an empirical remedy for chronic diarrhoea and chronic dysentery. A prominent gentleman of our city, some twelve years ago, had a chronic dysentery, and in his own language he had "suffered many things from many physicians"; and his case was given over as hopeless by physicians of our school, as well as by the old School. Some friend induced him to try Frost-weed tea, which cured him in a short time, (some 25 days). This case came under my own observation, but at the time I did not give the medicine much credit. The gentleman himself being a good talker, has recommended the remedy very extensively, and with good results. I have used it in a number of marked instances of chronic dysenteric diarrhoea, (when all other remedies given, *Secundum artem*, had failed,) with almost perfect success. I always give it in the form of a simple infusion, prepared fresh every day, in doses of two or three swallows, every two or three hours, or even oftener.

I assure you, it is worthy of further trials, and in several instances it has relieved me of a good deal of trouble and anxiety, and effected results that have indeed astonished me. I have used it a good deal, and can now call to mind only three or four failures in all.

I remain yours, very truly,

T. G. Comstock.

For the American Homœopathic Observer.

FLUORIDE OF CALCIUM.

BY A. J. MURCH, M. D.

That the proving of a drug, to be beneficial to the homœopathist, should be early followed and substantiated by clinical application, is clear, and I am very much gratified to see by the "Observer" that the *Fluoride of calcium* is receiving the attention of some members of the profession, and I do not hesitate to predict that, when all its virtues are developed and become known, it will come into general use.

I was first induced to the experiment of proving this compound while manipulating with the liberated fluoric acid in etching on glass. The amateur chemist knows that this acid formed by digesting the fluor spar, with sulphuric acid is the most caustic, and highly corrosive substance known. The minutest drop accidentally got upon my hand, into which it seemed to bury itself, causing most painful burning, and a sore which was a long while in healing. This, with its corroding action upon glass, a substance but little or not at all affected by the strongest nitric or sulphuric acids, led me to speculate in regard to its probable efficacy as a remedial agent. Could a compound possessing such a supra-powerful constituent fail to produce observable results if taken within the animal economy? And as all toxical or medicinal effects are but prototypes of disease, the question arose, may not this medicine prove a valuable acquisition to our materia medica?

Being unable to conduct the proving upon the dog to a termination satisfactory to myself (owing to the dogs' absconding), I was induced to institute an experimental and corroborative proving at the same time. The trial with the dog indicated the class of diseases to which I should look for its most obvious effects, i. e. goitre, and perhaps other scrofulous affections of the throat. In May I began by taking 0 gr. ss. three times per day, before meals, continued for three days but experienced nothing from it, omitted for several days and then took 3â dec. gr. ss., as before, the second day, P. M., there was oppression of breath such as arises from taking cold, this continued.

throughout the proving, subject to fluctuations of intensity, at the end of a week there was a prickling, burning, suffocative, sensation in the throat which grew worse at night, cold drinks seemed to aggravate and warm to palliate only for a short time, this feeling was less in the morning, but exacerbation occurred in the latter part of the day; much thirst, constipation, and consequent dizziness of head and dull headache; experienced irritability of bladder, frequent urging to urinate, urine causing smarting along the urethra, particularly at its external orifice; urine emitted pungent odor.—On the eighth day discontinued the drug, but there was an increase of all symptoms, the difficulty of breathing was such that it seemed as though the epiglottis was nearly closed, or that I was breathing through some thick substance which permitted but slight ingress of air to the lungs.

Having habitually weak lungs I was quite willing to let the influences of the drug expend itself.

This trial was conducted with a trituration, prepared by myself from a piece of spar, of rather impure quality.

About the same time I administered the same trituration to a female who had nascent goitre, one powder each evening. Now there is not the slightest perceptible trace of the disease.

A month since I put up a prescription of twenty-four powders, of the sixth dec. trit., for a female residing a distance, who was afflicted with goitre fully developed, of a number of years standing. ordered them to be taken once per diem; have heard from her once since, she thought there was gradual improvement in the condition of things, the tumor becoming softer to the feel; complained of constipation and premature menstruation, for which I gave Nux 3rd dec. drop doses.

I am of the belief that the best effects of this drug will result from the employment of the higher potencies.

I had intended to test the virtues of the Fluoride thoroughly in this last case and favor your readers with a report, that others might be induced to give it a trial, but I see that Dr. Bell has in a measure anticipa-

ted my design, therefore I give my experience with this agent, as far as it goes, and for what it is worth.

[Our readers will doubtless look with much interest for further communications from Dr. Murch, and also from Dr. Bell.—ED.]

Miscellany.

ANNUAL ADDRESS

Delivered before the Michigan Homœopathic Institute, at its Fifth Annual Meeting, June 8, 1864, at Detroit.

BY ALVIN BAGLEY, M. D., PRESIDENT.

GENTLEMEN:—At your last meeting you expressed your wish, that I should address you at this time, upon matters connected with our profession.

I feel it to be a station of some responsibility, and a good deal of embarrassment for one like myself, who has not been accustomed to such efforts. In addressing you, I feel that I am addressing men, whom, I cannot hope to instruct, and whom, it would be a waste of time to attempt to amuse.

The profession of medicine is not of recent origin, nor has it been, like many discoveries, sprung into existence by any sudden accident. It has been the gradual growth of centuries, subject, however, to occasional and frequent revolutions and startling innovations. Still it has kept on its course, steadily advancing towards and perfecting its great end and aim, a scientific system founded in philosophy, and made capable of subserving its grand purpose, the amelioration of the maladies of the human family.

ALLOPATHY.

When we take a retrospective view of our professional history, we can but laugh at its absurdities while we are forced to mourn and lament its failures, yet we glean many useful hints from those very absurdities and failures. We therefore find it both amusing and instructive to study the history of our profession from the days of the ancient fathers down to the present.

The schools of medicine have been almost as varied as the countenances of men, all unlike, and yet (until the advent of Homœopathy) all alike, words and not ideas have heretofore marked the differences of the several schools. Words represent the bark and ideas the heart of the tree of knowledge. Those who are tenacious of words stick in the bark, while those who seek for ideas penetrate to the heart: all the rivalries of the schools in the history of the profession have heretofore been men with differences of theories, only contentions about words, without resulting in any beneficial change in practice.

Mangle and growl as they might about their different theories of disease, all resulted in the same system of practice, all professed to prescribe upon the principle of contrarius; none of these

vaunted theories penetrated deeper than the bark.

No changes occurred of sufficient importance to be designated an era in the professional history until the advent of Homœopathy.

As nations have historical eras, so has science. Washington represented the era of our National existence, presided over its birth and declared independence, and Lincoln is now presiding at its majority, and representing the era of universal liberty. So Hahnemann stands out in bold relief as the representative of an era in the history of medical science as important to the world as either of our great national eras to us as Americans.

It is unnecessary to discuss with you the history of Allopathy prior to the Hahnemannian era. Were any of you ignorant of its modern transmigrations, for it does not require a critics eye to trace it in its winding way from its heroic blood lettings and purgings down to its present semi-homœopathy. It may not, however, be interesting to glance at it in its present garb. For it teaches us that, although *similia* is always *similia*, *contraria*, is not always *contraria*. I would not refer to the fragmentary remains of Allopathy as a profession nor discuss its efficacy as a practice, nor ——— pass a eulogy upon its departure were it not that its fossil remains are in our way and interfering with our legal right.

It in no way incommodes us, as practitioners, but is blocking up one entrance into our University. It has closed against us, the doors of an institution we helped to establish, and still help to sustain. It does not become us as men to sit down supinely and suffer our legal and national rights to be taken from us by the high handed assumptions of a school, whose ancient dogmas are fast becoming a laughing stock for boys.

I would not refer to its memory, but to remove its carcass from our legal path. Otherwise, I would have left it where one of its late authors, Dr. Worthington Hooker places it and let posterity preserve its memory if it could.

Dr. Hooker's definition is the clearest elucidation of Allopathy in any publication extant, where he in answering the question propounded by himself: "*What is Allopathy,*" says "*Is it one thing, one mode one, system? By no means. This term is applied to all kinds of practice by all regular physicians. It is a very extended and a very diversified combination. It includes much that is good, and much that is bad, and the practitioners of this allopathy are some of them bad practitioners.*" In this quotation, Dr. Hooker has systematised the practice, for the teaching of which the doors of our University are thrown wide open and our sons invited to come in and be taught.

Until the light of Homœopathy began to shed its rays upon medical science, the doctrine of contraries was as religiously and blindly worshipped as was any heathen deity ever worshipped by any of its most superstitious devotees; but no sooner was the test of truth brought to bear upon the dogma of contraries, than it exploded and scattered its fragments into Dr. Hooker's very extended and very diversified combination. I take the definition of that practice from Dr. Hooker, not because he is a recent author of that school, or because of his high standing as

an author and practitioner, but because human language could not more perfectly portray it. And this is the system taught in our University, this the system they would fain call the antagonist of Homœopathy, this the system they would not have lowered by coming in contact with Quackery.

What wonder then that the *Regulars*, deprecate contact with Homœopathy! What wonder that they attempt to get rid of discussion by silence! What wonder that the Board of Regents overridden by the medical faculty of the University, with threats of resignation, trample under foot a law of the State making it incumbent upon them to establish a Homœopathic chair and elect a Homœopathic professor in that institution. And what wonder that having refused to comply with the plain provisions of the law, they should refuse to assign a reason for such refusal. The truth is the profession does not come into contact with the light lest their darkness be made hideous.

But what is this boasted Allopathy for the preservation of which in its purity they so sedulously govern the University. What has it done to so recommend it to exclusive public confidence! Enquire of its adherents, and there is nothing which they design to tell us but point to its great antiquity with its accumulated facts. And how they plant themselves on challenge reputation. They call our system an innovation of their time honored institution. They profess to trace back their successors in a regular line of descent through all the exploded dogmas of Pathology and modes of treatment for 3,000 long years, and pride themselves upon the dignity of their ancient paternity. But perhaps it were well to enquire somewhat into the geneology of this ancient lineage, and it may be ascertained in what consists their accumulated facts, for on this alone they base their claims to confidence. Talk to them of their want of principle; of the entire absence of a law of cure and they ensconce themselves behind this mountain of accumulated facts, of 3,000 years growth. The most prominent of their ancient pathological discoveries, and the one on which they seem to base their modern practice is what is termed the Humeral Pathology. Hippocrates, the father of modern Allopathy, the great head of the profession, the connecting link in their geneological chain, and through whom alone they trace their claim to antiquity, first promulgated the doctrine of the existence of the four Humors. The *Blood*, the *Phlegm*, the *yellow bile* and the *black bile* in the proper proportions in respect to quantity, quality and mixture consisted the healthy condition, and that any variation in the quantity or in the proportions of these Humors occasioned disease.

His treatment consisted in expelling from the system by bleeding, purging, sweating, etc., a certain amount of any Humor which might exist in excessive quantity and thus restore those proportions which constitute health. Now if the Humeral Pathology were true, the evacuating practice were certainly well chosen. A more philosophical conclusion could not have been arrived at, from the pathological premises. If disease consisted in the undue proportions of one or another of these Humors what could be

more rational than that the excess should be purged out through some of the evacuating channels. This Humeral pathology prevailed for a long period unquestioned and the treatment legitimately deduced from it was, of course, recognized as the means of cure. A little more than half a century ago that allopathic humbug, the humeral pathology was exploded. But strange as it may seem the old system of purgatives founded upon it is still retained by all good Allopaths, and is still taught as a science in our University.

About the commencement of the present century the Allopathic world was divided into numerous sects. The Solidists, the Vitalists, the Eclectics, the Brunonists, the Expectants, etc., each with its own peculiar notions of pathology, its own peculiar ideas of the cause of disease, waging fierce warfare in support of their respective dogmas. But singular enough, in their practical deductions, all Humeralists, all agree and all still agree in the necessity of purging out the preponderating Humors.

Whatever of our remedies they prescribe, and they are not few nor far between, are prescribed upon the same principles and for the same end, and are mixed up with their old formulas, and not in accordance with any known law of cure. They acquire their knowledge of the use of our remedies, not from the application of any principle, not from a knowledge of any law of cure, but by a process of absorption. They know that with our remedies we cure disease, and argue, that with the same remedies they also succeed without any knowledge of the law of cure, upon which their efficacy is based.

This law with its harmonious and certain action, the knowledge of the true pathogenesis of the drug with its adaptation to the pathology of disease, is what we wish to teach them in the University, and this is what they are particularly anxious not to learn. We would fain find entrance into the University for the purpose of teaching them the true philosophy of cure, but they have barred their gates against, and waged war upon us, and from behind their impregnable ramparts make faces at us. Being thus deprived the benefits of open combat, our only resource known to honorable warfare, is to cut off their supplies, and this we are most effectually doing whenever we have a sentinel posted. Hence their grimaces and gnashing of teeth upon us, from within their fortification.

Being thus deprived the right which the laws of our being have conferred upon us, and which the statute law of our State has confirmed to us, the common right of every citizen of Michigan, it behooves us to improve all the facilities we do enjoy to perfect ourselves in our noble science. Knowing as we do know, that we are in the right, we can well afford to practice forbearance towards our misguided and wayward brethen.

If we were permitted to enjoy the rights guaranteed to us by the law, it would greatly facilitate the progress we are now slowly, but surely making towards the redemption of the medical Profession from the absurdities and empiricism of the darker ages. Were we in the enjoyment of our rights in the University, it would hasten the day when the Lion of intolerance would be shorn of his strength, and his dominion be given

to the lamb. But this may not be, we must therefore rely upon our own individual efforts to bring to perfection our noble science.

PROVINGS.

Although much, very much has been done to advance the truth, still very much remains to be performed with our *materia medica*. Although infinitality in advance of all others, still very far from perfect. The constant accessions made by the additions of new and heretofore untried remedies, are creditable and worthy of all praise. Yet if we would be fully up to the standard, we ought to set for one end and aim, we should still move rapidly and carry forward this great work of perfecting this branch of our noble science, a labor which the spirit of the age and the necessities of man alike demand at our hands. This we can do by individual effort, without the aid of collegiate facilities.

Scientific tests and proving of remedies, old and new, are legitimately within the sphere of our operations. The material for enriching our storehouse of useful knowledge is thickly strewn in our daily path, and whether we mould that material into form and make it available to the profession, depends upon our individual exertions and sacrifices. Let us not throw away these golden opportunities strewn upon us as if it were at every turning, but seize upon every presentation and make the stubborn difficulties yield to our indomitable will, and however insignificant in reference to the general cause, a single humble effort may appear to us, yet rest assured the proving of a drug however little it may have added to the general map, is not entirely thrown away upon the prover or the profession. There is no method by which the impress of the drug disease can be so ineffaceably imprinted on the mind as by its simple provings, and no man can enrich his own without improving other minds with which he comes in contact, so the proving of a drug confers a benefit, not only on the prover, but also on the whole profession. The more intelligence we bring to bear upon our enemies, the sooner we shall bring about the time which rests securely in the future, when our claim to scientific truth shall surely be acknowledged the great professional Millennium to be ushered in, and Homœopathy be crowned triumphant. The grand towering principle, *Similia Similibus Curantur*, overshadowing the whole of rational medical science, shall step out prominent and immovable and be known and recognized of all men.

Be it then a prominent part of our individual as well as united and associated vocation, to test and prove whatever may be thrown in our way, giving the faintest promise of usefulness as new remedies, for, frequently important results flow from almost hopeless efforts. The humblest herbs we unconsciously trample under our feet, may prove the most important in mitigating human suffering.

Old remedies too whose tests and provings have only been made in other climates, and upon people with different constitutions, and subject to different influences from those surrounding us, should be carefully re-tested in our climate and upon persons upon whom the acclimating process has matured its pathologic changes. Proving in Germany and provings in Michigan of th

same drug, I apprehend would develop the fact that the provings are influenced by their surroundings. Owing to the same cause, not perhaps very readily explained, fruits in Michigan bear but slight resemblance to the same varieties in New England. Transplanting the original stock from New England in our beautiful Michigan, improve the size, color, odor and the flavor, in short, all the properties of the fruit. Are not the same or similar influences operating upon the properties of medicinal plants! And is it not true, that our indigenous plants if fully proved, would develop a very different pathogenesis, and enable us to prescribe them with more perfect certainty of their results.

If I am correct, then there is a double motive urging us to reprove the old materia medica. Our own peculiar pathological changes of acclimation and the Pathogenetic peculiarities of the plants in this climate.

As we are in an early future to be the teachers of the drug pathogenesis, let us not be unprepared to enter upon that vocation with that intelligence which the Homœopathist alone has the means to acquire, and which, with becoming industry we may be prepared to impart in all its perfectness.

PATHOLOGY.

The Physicians in Michigan are peculiarly situated. We have no land marks in publications, on pathology. Each physician in his own locality has to feel his way among the rocks and quick sands without a guide. The same causes producing changes in the vegetable are also acting upon the animal structure. The same law which produces changes in the chemical combinations in the plant also exerts its influence upon the vital forces of the animal diseases in New England, bears but slight, if any, resemblance to the diseases in Michigan. The influences bearing upon the vital forces being different, our pathology is different, although we, for the sake of convenience are in the habit of applying the old familiar names to classes of disease. The eastern physicians unaccustomed to our locality, would scarcely recognize the disease by those names.

These physicians whose system of practice compels them to follow the foot steps of their illustrious predecessors, or in other words, who have no fixed law of cure in our west, find no tracks. Poor fellows, God help them.

It is therefore incumbent upon the western physician to familiarize himself with his surroundings and be prepared within himself to combat the influences with which he has contended in his own particular locality; in short, he must hew out and reduce to proper shape his own system of pathology, and adapt his medication to its peculiarities. This, with one law of cure, we could do with unerring certainty with a materia medica of Michigan provings.

As new forms of disease are being developed among us, we instinctively turn to older countries for diagnosis, prognosis and modes of treatment. This is right, we should learn what are the characteristics governing all form of disease in all countries. But in doing this we must not forget that to imprint upon the mind, a true picture of the symptoms for our governance, we have to wait until the disease has become Michiganized.

We have to study its peculiarities as developed by our climate before we can treat it with that degree of intelligence which insures success. I might speculate upon the causes of our peculiarities, but it would after all, be mere speculation. As well might we account for all of our Westernisms, political, moral and social, as one pathological. It would be a waste of time, much better employed in studying the effects and fitting ourselves to meet, and successfully combat them.

But were I to speculate upon the causes of our local peculiarities, I should direct my attention to the phenomena of the circulation, and inquire whether the heart, acting as a mere force and suction pump, is the great propelling agent, or whether chemical affinities acting upon the vital forces, are not the real impelling power, and that the heart by its action merely regulates and keeps in proper checks that power. If it should be ascertained that the true cause of the systematic circulation is the oxygenized action of the arterial blood derived from the affinity the venous blood has for the oxygen of the atmospheric air in the lungs, thereby producing a current, and that the oxygenized arterial blood has an affinity for the structures through which it is forced, then changes of climate must necessarily produce changes in the vital forces. Although the air we breathe may not be susceptible of chemical analysis, yet the slightest change may influence the force with which it is brought in contact with the circulation, acting as it does upon the most delicate tissues of the human organism. If it should be found that the circulation depends upon chemical affinities acting upon vital forces we should not be at a loss for a plausible theory accounting for our western pathological peculiarities. I throw out these hints, not to assert the facts, but to elicit attention to them and awaken inquiry. The doctrine that the circulation depends upon chemical affinities would not necessarily weaken the argument in favor of the dynamic action of remedial agents, but would in my view, furnish an unanswerable argument, in favor of specific medication, and that with the higher attenuations, equally applicable to the East and West, the mountain and the vale.

[By reference to report of proceedings of Institute published in July No., it will be found that the Doctor's speculations elicited a friendly discussion; only a few of the members coincided with the worthy doctor, but all recommended the publication of his address.—Ed.]

PHYSICIAN'S FEES.

We observe a movement in various sections of the country, looking to an increase in physician's fees. The College of Physicians of this city, the Connecticut River Valley Medical Association, and other organizations, have adopted higher rates of charge. This is perfectly right and proper. The physician's fee was disgracefully low in times of cheap living; and is utterly inadequate at the old rates to meet the present demands.

The medical profession is very poorly compensated for the time, talent, intelligence, labor and energy, with which they devote themselves to

their arduous duties. Their remuneration is too small to enable them to avail themselves of the facilities to attain that amount of scientific knowledge which is necessary to an intelligent application of all the means provided in nature or by art for the treatment of disease. There are comparatively few young men who begin the practice of the medical profession who have not sufficient ambition, if they had the means, to pursue their studies and add to their knowledge, and to this end procure needed books and mechanical appliances, so indispensable to enable them to do justice to themselves and to the communities in which they reside. Their remuneration, however, is so inadequate, that they are compelled to be satisfied with the text books and pocket instrument cases with which they left the schools, and to supply themselves with but a meagre stock of remedies. Is it any wonder that they gradually lose their ambition, too often become loungers around places of public resort, and finally settle down into a mere routine practice!

Every one knows the power of money, and the young physician who has it at command, or who is fortunate enough to fall into a "paying practice," is very apt, if he steers clear of an immoral course of life, to become an intelligent practitioner, an honor to his profession, an ornament to and the pride of the community in which he resides.

There is a pressing necessity, aside from the temporary greatly increased cost of living, that our professional fees should be permanently increased. It is needed, that we may have the means to perfect ourselves in the knowledge necessary to qualify us for a proper discharge of our duties to the community.—*Reporter*.

Obituary.

STORM ROSA, M. D.

We regret to announce the death of Dr. Storm Rosa, of Painesville, Ohio. He died on the 8d of May last, at the age of 73, after a long and useful professional life, twenty years of which was devoted to the practice of homœopathic medicine.

Dr. Rosa was born in Coxsackie, Greene county, N. Y. Studied medicine with some of the most eminent allopathic physicians of that State, graduated in 1816, located in Madison, Ohio, where he married in 1818; removed the same year to Painesville, where he practiced medicine until the time of his decease. He was induced to investigate Homœopathy by Drs. Pulte, of Cincinnati, and Barlow, of New York, in 1841, and in 1848 adopted it as his school of medicine. In 1850-'51 he lectured on "Theory and Practice of Homœopathy," in the Eclectic College of Cincinnati. In 1851-'52 he accepted the chair of Obstetrics and Diseases

of Women, in the newly organized Western Homœopathic College at Cleveland, Ohio. This Professorship he occupied for several years. Upon his retirement he was tendered the chair of practice in the St. Louis Homœopathic College, but declined. He was one of the earliest pioneers of Homœopathy in Ohio, and presided over the first public meeting of homœopathic physicians, which was held at Benton, Ohio, and was composed of *nine* members. Dr. Rosa's address before that body is still in existence. His interest in homœopathy did not lessen with his advancing years, and although he wrote but little his feelings were always for the advancement of the cause.—As a man he was kind, gentle, and modest to a fault; as a physician, practical and of sound judgment; as a lecturer, plain and eminently practical H.

DR. JAMES E. BLACK.—The death of Dr. James E. Black, on the 18th of last May, in the 27th year of his age, will be much lamented by many readers of your Observer, and particularly those who graduated with him at the Homœopathic Medical College, of Pennsylvania, six years ago. He was a lover of Homœopathy. He labored hard to advance the profession in which his whole soul was engaged, and if he had been spared to us a little longer, he would have become a star in the foremost ranks of those who are unfurling the mighty truths of Homœopathy. His incessant study, no doubt, brought on an hereditary trouble, which appeared in the form of a psoas abscess, and was soon followed by the glow of the hectic flush. He waited calmly for the end, only remarking, that it seemed hard to die in the morning of life.

LONDON, C. W. June 10th, 1864. M.

A. F. STEINHOFF, M. D.

It is our painful duty to announce the demise of this promising young physician at Farmington, Mich., August 4th, 1864. His relatives reside in Canada, where he was a student of Thos. Nichol, M. D. He was quite popular in the village of Farmington, successful in his practice, and has left a large circle of friends to mourn his early departure.

A M E R I C A N

Homœopathic Observer.

"Similia Similibus Curantur."

"I present you with a Truth long sought for, a principle of eternal nature, I appeal to existing facts alone to convince you; and when a conscientious and complete course of study shall crown your researches with success, then, as I have done, bless Providence for the immense benefaction he has allowed to descend upon the earth through my humble agency, for I have been but a feeble instrument of the Omnipotence, before which we all bow in humility."
HAHNEMANN.

VOL. I.]

DETROIT, SEPTEMBER, 1864.

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Editorial Notice.

Our bookbinder being engaged on "New Provings," has not yet delivered the August number of the *Observer* (Aug. 29). September number is nearly all in type, and hereafter we expect to issue our Journal punctually by the first of every month.

We feel grateful to our friends for the liberal support they have given. With their assistance we can make the improvements contemplated, and we expect to be able to do so, if subscriptions are paid promptly. We desire a prompt response to this call for

payment. We are not begging. If you do not think that you are receiving a dollars worth do not pay it. *If the Journal is worth a dollar to you send it without delay.* If you wish to discontinue, return the numbers received and we will return postage and subscription also, if it has been paid. Back numbers are getting scarce and we shall hardly be able to supply the demand for them from new subscribers who wish the *Observer* from the commencement for binding.

Were we to publish all the recommendations received it would fill a number. We will print one only.

"In it you present many a practical thought and useful fact which may be caught and used by the active practitioner, who is unable, for want of time or indisposed by fatigue or habits, to wade through the tedious, tiresome essays of the larger journals."

Reviews & Book Notices.

NEW HOMŒOPATHIC PROVINGS. RECOMMENDATIONS OF PROFESSORS, PHYSICIANS AND THE PRESS.

Geo. W. Betteley, M. D., Professor Materia Medica in the Cleveland Homœopathic College, says: "Dr. Hale's new work on our indigenous remedies, is now before the profession. Those who require their mental food to be perfectly digested for them before they can assimilate it, may be disappointed by its perusal, but they should not lose sight of the fact, that before these medicines can be as thoroughly understood

as are the remedies of Hahnemann, an equal amount of labor and study must be expended upon them.

That our indigenous remedies are really of more value in the treatment of the diseases peculiar to our climate than those of foreign growth is the positive opinion of nearly, perhaps quite, all who have used them, and Dr. Hale has done a good work in compiling the knowledge and experience of the profession of all schools in relation to them; in some cases a mass of crude material it is true, but if it contains all that is at present known upon that subject, what more can we ask or expect; let us not refuse to eat, because we cannot have the whole loaf.

The book is valuable and suggestive and no physician can afford to be without it. It is gotten up in good style and is a credit to the publisher."

"I am very much pleased indeed, with the 'New Homœopathic provings.'" "Just the work I have needed for a long time." "You have given us a much better work than I expected." "I think the information given in reference to half a dozen of the remedies are richly worth double its price." "An admirable pioneer work—it does credit both to editor and publisher."

"I think that the work is an excellent one. It fills a void in our Materia Medica."

"Every one is pleased with the style of the book. They are agreeably disappointed with its appearance and the amount of matter in it."

"Your book contains one-fourth more than than any one could expect for the price. The arrangement of the matter is admirable. I discover that it is free from those "shadows" of symptoms so common in the old books. Not merely giving pure symptoms but also the pathological condition each drug is capable of producing, renders it doubly practical. When indigenous remedies are fully developed by provings on healthy persons, disease will stalk around at midnight only. Doctors are asleep!

NEW REMEDIES: Their Pathogenic Effects and Therapeutical Application in Homœopathic Practice. By Edwin M. Hale, M. D., late Lecturer on Materia Medica and Therapeutics in Hahnemann Medical College, etc.

The author of this volume is one of the most eminent and popular Homœopathic physicians of this city. He has devoted himself closely in this work to a classification of a number of remedies, mostly indigenous, but few of which have had any place in the published Materia Medica of the Homœopathic school. Not the least interesting portion of the work, and one involving a great amount of labor and expe-

rience, is that devoted to the "provings" of the remedies introduced, of which the great majority have never been proven until now. Physicians, for whom this volume has been expressly prepared, will appreciate all efforts for the perfection of their practice, and accord to the author (editor) all the credit which so valuable and complete a work has a right to.—*Chicago Tribune.*

Practice of Medicine.

CLINICAL OBSERVATIONS—WHAT ARE THEY WORTH?

BY J. F. MERRITT, M. D.

It is a true, though a trite saying, that "facts are stubborn things." If it were not so—if they did not leave behind them as they pass, a record of their own, one might be misled into the wildest vagaries. But "he who runs may read"—in characters so legible has the hand of truth made her record. Shutting our eyes to the logic of past events, and their inevitable teachings one would suppose that the human intellect had at last reached that towering height, that consummation devoutly to be wished, where disease and death retire before the approach of the Physician—like the vapors of the night before the rising sun. Alas! for the title to a name for professional superiority, that storied urns and marble tablets should alike chronicle the virtues of the dead while living, and mutely tell in the mental ear of the passer-by "Physician's art was vain."

Let the reader take up many of the medical periodicals of the day, and he will see illustrations of the truth of the above, demonstrations of the proposition that the legitimate teachings of too many recorded clinical cases are, that no failures occur. The conclusion is inevitable (granting the promises they give us,) that they never, at least very rarely, experience the chagrin consequent upon the failure of their drugs to keep disease and death at bay. These are obviously the influences designed for the reader to draw. But let the writer indulge a fancy sketch and there decide, dear reader, if fancy has not availed itself of Photography and given you a picture of living facts.

Case 1st. ——— itis; pulse 160; tongue dry and dark with sordes, fœtor of breath intolerable, *subsultus tendinum*, countenance Hippocratic, surface and extremities cold, cornea glazed, involuntary evacuations and general relaxation of the sphincters—in this condition of things the patient is first seen. Upon carefully grouping the symptoms and

studying the pathogenesis of the *Panacea sempercurans*, a remedy heretofore but little used in the disease under treatment, because its specific powers in relation to the peculiar phase of the disease here presented had not been discovered—is administered and presto-change! Magically, the hue of health in a few short hours succeeds the pallor of death, the grateful pressure of the sick man's phalanges—takes the place of the subsultus-tendinum, and the grim visaged fiend moves with scythe in hand for the harvest field of some less fortunate doctor.

Case 2d. Very similar, except, that the disease was complicated with ——— and ——— and occurred in a person of tuberculous diathesis, rendered somewhat unfavorable as to the prognosis by the circumstances of intemperate habits, conjoined with vital powers greatly enfeebled by sexual indulgence, and syphilitic sequelae. The ———itis being regarded as the disease from which most immediate danger is to be apprehended the *Panacea sempercurans* being the specific for *that*, and covering the side issues in the case, viz: the tuberculosis etc, etc, etc, as well, it is administered with effects equally as rapid and surprising as in case No. 1.

Case 3d. Idem.—And so on with a half score or more of similar cases, until seriously speaking now, ones credulity is loath to bear the increasing burden. Perhaps the Photograph is slightly colored to bring into a bolder relief the features of the cases. In passing through the camera of the fancy it may be that the features have been slightly magnified, but certainly none have been added.

Medical science is constituted of a few central cardinal truths, added to which as they have rolled along down the pathway of centuries, are the accretions of observed and recorded facts, until the aggregate of medical truths has assured proportions, in a slight degree commensurate with its semi-divine mission. Clinical observations and the truths deducible therefrom are so to speak the soil into which science strikes root, and thrives; but mulched at the root with error the trunk withers and the foliage dies. How important therefore it becomes that we should distinguish between the *apparent* and the *real*! The medical man stands as the unbiassed witness upon the stand, "*to tell the truth, the whole truth, and nothing but the truth.*" He testifies in behalf of the cause of truth against error. If he has succeeded in overcoming disease—*how* has he done it? Indeed, is he sure he *has* done it? Might it not have been only a coincidence? Has he witnessed the results of any considerably extended use of his chosen remedial agents? How great a

share of the work was accomplished by the vis medicatrix? These and others of a kindred nature are interrogatories to which he must give categorical answers. He tells us that he did not strike upon the rocks of *Scylla*, but we must know if he was not engulfed in the breakers of *Charybdis*.

It is quite as important to the interests of medicine, that failures should be recorded as well as successes. The marine topographer locates sunken rocks and coral reefs as well as safe and spacious harbors.

But the writer would not be misunderstood. It is not designed to throw obstacles in the way of true progress, or to imply that new remedies are to be discarded, for the reason that they are new. But he would thus enter a protest against the encroachments upon the domain of science of a growing evil of our day, and evil felt to be on the increase. In our impatience to move fast may we not make the "worse speed." *Prove all things*, says the Apostolic sage—but not only this—he commands us to "*hold fast that which is good.*" This is the sifting process, a process to which no class of men have more need to subject their work than the medical profession, and especially is this true of those who record clinical observations.

Let the writer suggest, therefore, to the contributors to your journal, a record now and then of "*uncured cases*," embracing those in which both the *Diagnosis* and the indication of cure were in doubt. As apposite to the matter in hand, below is given the records of a case in which the *Dignosis* way never never made out so as to be satisfactory. It was only guessed at. It remains to this day surrounded by doubts which a *post-mortem* alone could have cleared up.

A case of *suspected Lumbar Abscess*: Mrs. M. aged 38, of scrofulous diathesis, married, was seen for the first time on Thursday, October 30th, 1862. From her history of the case it seems she had suffered much during the summer with lame back, pain in the back, had felt weaker than usual, in a word "*had not felt well all summer.*" For three or four days preceding my visit had had headache, rigors succeeded at irregular intervals by hot flashes, thirst and febrile excitement. Pulse 110, skin hot and dry, severe pain in the back in the region of the kidneys, but none in the extremities a circumstance, which, at the time removed it out of range of the probability of continued fever. Tongue much inclined to dryness, with a strip about an inch and a half wide extending from the base to the apex, of a color cherry red verging upon brown. Treatment *Bryonia* and *China*.

Friday 10 A. M.—Pulse 120; tongue de-

cidedly dry; circumscribed flush upon cheeks; delirious at intervals during the night, but rational at the time of the visit, much uneasiness, eyes injected and very bright. Hyosciamus added as an *intercurrent*.

Saturday 8 P. M.—Pulse small, quick and intermittent; breathing hurried, 40 to the minute; anxiety of countenance; surface cool and clammy; abdomen tender upon pressure; bowels tympanitic; tenderness of the lumbar region, also tenderness at the point of insertion of the psoas muscle into the femur; had cold sweats during the whole of the preceding night. *Ars.* and *Carbo veg.*

9. P. M.—Returned, and in 10 minutes after had the mortification to see my patient die, after being confined in bed only thirty-six hours.

In order to afford an opportunity of approximating a conclusion as to the nature of the malady, I would state: That during her pregnancy early in the spring, a few weeks before her confinement, she had erysipelas of the face which extended up over the scalp, and was accompanied by constitutional symptoms of such severity as to excite fears that she would die. The child to which she gave birth soon after bore unmistakeable evidences of having fully inherited his mother's strumous diathesis, and subsequently came near dying from a scrofulous abscess, which nearly surrounded the whole neck. This condition of the child at the time of its birth and for several months afterwards, throws some light upon the case. But the special pathology of the disease of which the mother died, was held in doubt and is to this day. The writer did not even *suspect* the precise nature of the disease until the second visit, and at the time of making the third she died. Some deductions which are believed to be legitimate and the failure to make others which might have been made must be left out for the want of time, upon which professional engagements will not warrant the writer in encroaching. In future more of these *uncured cases* may appear if the indulgence of the kind editor of this Journal shall be extended as it has already been.

[Our columns are at your service.—Ed.]

EUPHORBIA COROLLATA IN DYSENTERY.

A Physician writes: "A few years ago, we had a great deal of diarrhoea among all classes, and some of the cases proved very obstinate and did not yield readily to the

ordinary remedies. My student told me that some of the old physicians of Detroit, had the year before used what he called Spurge, (a species of the Euphorbia) with the most gratifying results. He found the plant and made a tincture of the top of the plant and used it empirically, of course. Two or three drops of the mother tincture in half a glass of water was the preparation used. I never found any thing act so like a charm, curing all the obstinate and difficult cases. I gave some to my friends and they were delighted with its effects. Unfortunately I broke my bottle containing the tincture, and am all out. We have a dysenteric-diarrhoea prevailing here which gives us much trouble, as it does not yield to ordinary treatment, at least, not satisfactory. I am not sufficiently acquainted with the Spurge to know it when I see it, and I can find no one here who knows it at all. Can you, after what I have said, help us to some of the article.

For an account of the use of Euphorbia in dysentery see "New Homœopathic Provings."

Dr. D. B. Whittier, says: "Dysentery troubles us much this season. Mucous, slimy discharges like catarrh of bowels with dysenteric pains and other characteristics, but not amenable with the usual remedies. Nux. Coloc. and Ars. answer best, but none satisfactorily. Will some one give us a word on *mucus dysenteric discharges*?"

We would direct the attention of the Doctor to Mercur. corros. also Leptandria. For an account of the use of the latter in Dysentery see pages 292 and 297 of "New Homœopathic provings" edited by Dr. Hale.

Dr. Jas. D. Tyrer, says: "I have used the vine known as the five finger leaf in many cases of flux, and always with good success. It resembles the strawberry vine, except that the leaves are longer and slimmer. It is the only vine that has five projecting leaves. It usually grows in localities adapted to strawberries.

The Doctor doubtless refers to the "*Ampelopsis quinquefolia*."

For the American Homœopathic Observer.

EUPATORIUM PURPUREUM IN DROPSY.

BY E. M. HALE, M. D.

The following case, illustrative of the powerful curative action of this remedy in Anasarca, came under my observation in the practice of Drs. Hale and Smart.

An old gentleman who had twice had attacks of dropsy, the lack of which was removed under the action of Apocynum cann; had a third attack more severe than either previous one. Influenced by some officious friends, he placed himself under Allopathic treatment, though he had recovered well under the homœopathic on former occasions. He steadily grew worse under the usual drugging, purging, diuretics, etc., until he was unable to lie down, or move, or get up from his chair. Distressing dyspnœa set in; the whole body and extremities became enormously œdematous; the secretion of urine became very scanty, only three or four ounces in twenty-four hours; and altogether the man was in a very critical condition.

All this juncture, Dr. P. H. Hale was called. Upon examination no organic disease of the heart, kidneys or liver was discovered. The urine, however, was slightly albuminous. The pulse was feeble but regular. The extremities cold, with considerable general prostration. No appetite, considerable thirst, and a slight tendency to stupor, (dullness of mind.)

After some consultation, and partly upon my suggestion, it was resolved to give the Eupatorium pur. (commonly known as "Queen of the Meadow.")

The mother tincture was given in drop doses (8 or 10 at first) every three hours. In twelve hours the urine was slightly increased. In twenty-four hours the dyspnœa was somewhat ameliorated. In forty-eight hours he could lie down with comfort; and in seventy-two hours he walked across the room, and the œdema was rapidly disappearing from his body and limbs.

For three weeks this man had been plied with Allopathic remedies after the approved fashion, and now we see all the worse symptoms removed in *three days*, by drop doses of a simple remedy. This is even better than giving minute doses of Arsenic, Hellebore, etc., after the routine manner of some of our own school. The use of the Eupat. pur. in dropsy is based upon purely empirical data, but of such a reliable character that no hesitation need be felt in resorting to it. It is even better than Apocynum cann, in many cases, and I think its effects are of a more permanent character.

This is one of the plants selected by the

Bureau of Provings of the Western Institute, to be subjected to a thorough proving. We hope to receive the assistance of every physician, who can possibly aid in proving, or who will collect clinical experience with this remedy. All that is now known of this plant, will be found in "New Provings" lately issued.

NOTE.—Since writing the above. I hear that the patient above alluded to, has quite recovered his usual health. HALE.

BRIEF NOTES ON CASES OF DISEASE.

Treated by J. H. Nankivell, M. R. C. S. Penzance.

William Richards, aged 7. This case was one of strumous ophthalmia, principally affecting the eyelids, which were inflamed and thickened. During the first week of treatment he took *Sulph.* 3 night and morning, without any perceptible effect. *Hepar* was then prescribed with much relief, as far as the intolerance of light was concerned, but the lids remained pretty much as at first. He then had *Arsenicum* 3 for about ten days, with the greatest benefit: the lids regained their natural healthy state, and the photophobia ceased.

Elizabeth Jane Chapel, aged 20. Twelve years since, when small-pox was prevalent, she refused to be vaccinated (had never been vaccinated); she took small-pox, had a severe attack, and has ever since been stark blind. The eyes are in a state of constant oscillation; and she thinks that this is caused by a burning pain in the head, which she suffers from at times—it affects the forehead and vertex; when the pain diminishes, the rolling of the eyes is less marked. She took *Nux vom.* 3, and afterwards *Gloncine* 3, with great relief to the headache.

James R., aged 40. Twenty-two years since he had severe inflammation of the left eye and utter loss of sight; the eye is now in the worse state of staphyloma. About a month before I saw him, his right eye had also become diseased; and with a credulity most astounding, he trusted for relief principally to the nostrums of a herbalist.—When I was called to this poor fellow, I found the cornea of the right eye perforated by ulceration, and the organ rendered useless. Here are two cases of blindness, not the less lamentable from their being caused partly by the prejudices and unwittingness of the poor sufferers themselves.

Ann M., aged 18. Psoas abscess. This case is so far interesting, inasmuch as it affords an instance of the (so to speak) incarceration of pus for at least three years, without the production of any severe constitutional symptoms. The above named patient was seen by me about two years

since, and I found that she had suffered from angular curvature of the spine, and as the result of this, pus had formed and gradually found its way to the saphenic opening in the left thigh. Fluctuation was very distinct. I proposed to make a valvular or subcutaneous opening, so as to evacuate the matter, or at least a large portion of it; but the girl and her parents were very averse to any operation, and nothing has been done. The patient is active, cheerful, and tolerably healthy; she walks about and amuses herself with her domestic occupations; it may be that she is doing better than if the abscess had been discharged.

Jane Tremellick, aged 1 year. Vaccinated when five months old; *was healthy before that but never thrived afterwards* (how frequently one hears a similar statement!). Two months since had measles; has been very ill ever since. During sleep she scalds and burns like fire; at night, shrieks for hours, and is like a child convulsed; has a dreadful cough; she often trembles violently; vomits her food. The lungs were much congested, and loud bronchial rhoncs were heard throughout the chest. There was no evidence of consolidation of pulmonary tissues. She had *Aconite* for three days, when the report was that the burning and heat of the skin had disappeared; less shrieking at night; no sickness; some sweating whilst asleep. The child then took *Bryonia* 12 for four days, after which the mother informed me that the child had regained her appetite, but did not sleep well. She afterwards took *Cham.* and *Puls.*, when I was informed that the little patient was as hearty as ever, slept well, and was come "clever."

William Charles Harvey, aged 18 months. Five months since was a healthy child, and able to walk; he then got the measles, and now is quite unable to stand; his appetite is most voracious, and he has bread at night to satisfy his craving; diarrhoea; food passes through him but very little digested; there is a slight cough.—June 1. Rec. *Calc. carb.* 3, one drop three times a day.—8th. Bowels less tumid; diarrhoea less; and the child has walked about the house! Continued *Calcarea*.—15. Is improving daily, getting stronger, and has walked or rather "run away" out of the house.—On the 18th he had a relapse, and took *Sulph.* 30; after which he again mended, the *Calcarea* was repeated, and he soon made a good recovery.

Elizabeth M., aged 23. I relate as a curious one, and illustrative of the "*nimum diligentia*" practice. Seven years since this young woman was bitten by an adder in the right leg. She had been gathering "hurts" on a down, and fell on a viper, which, being thus enraged, turned and bit her; she felt

most acute pain, and hastened home. *Ten hours* afterwards when the limb was much swollen, a surgeon excised the wounded part, and in two months it had healed; but she has ever since been subject at times to an ulceration of the cicatrice. She had a lotion of *Calendula*, and took *Lachesis*, *Apis*, and *Arsenicum*, but only with partial benefit. It is difficult to understand the *rationale* for the use of the scalpel in the above instance, bearing in mind the time which had elapsed, and the rapidity with which animal poisons are absorbed.

Elizabeth W., aged 43; has had thirteen children. For some months has had pain in the right breast, which shoots through the shoulder; legs affected with lepra vulgaris for fourteen years; bowels much relaxed; evacuations slimy; griping pains before and after stool. She had *Merc. corros.* 8, and did not return. I was struck with a remark made by this poor woman, and which had a smack of philosophy in it, viz.: "Well, this world is but a hospital, and we shall all die in it."

Anasarca from a Cold.—Agnes H., aged twenty-four, unmarried. Was in good health until seven days since; was then exposed to cold rain. The next day her face swelled, and she felt short on the breath; in a week the arms and legs were stiff and much swollen; the urine very scanty and high colored, was not tested for albumen; no pain anywhere. She took *Apis mellifica* 3, with immediate benefit; she had also a few doses of *Dulcamara*. She rapidly recovered, and her own impression was that the bee-poison was the alone remedial agent, the *Dulcamara* having been of no use to her.—*British Monthly Hom. Review*, August 1864.

PNEUMONIA.

BY L. SHAFER, M. D.

Several years since I treated two cases of pneumonia which terminated fatally. The immediate cause of death was the gradual filling up of the air cells and passages with sero-mucus, as tenacious as melted glue, and which the patients were unable to expectorate. During the past year I treated two cases of pleuro-pneumonia, in which the same symptoms and similar to the above were developed.

For that particular condition I prescribed Belladonna of the second dec. dil. three drops in twelve teaspoonfuls of water. Dose, a teaspoonful every half hour till the urgent symptoms were relieved. After taking the remedy copious expectoration

speedily ensued, and in due time both made a good recovery.

VARIOLA—SARRACENIA PURPUREA,

BY D. J. EASTON, M. D.

I have treated twenty-seven cases, out of which but two died, one a child and the other an aged man. In both of these cases the eruption was beautifully developed, and I certainly believe that if they had been properly nursed they might have recovered. It seems to act as a purifier of the blood, allays the fever, and lessens the other sufferings which prevail in small pox. I certainly think it worthy of notice, and hope others of the profession will try its efficacy in this loathsome disease, whenever an opportunity permits, and report the same through the "*American Homœopathic Observer*."

SARRACENIA.—The Palmer (Mass.) *Journal* states that about sixty cases of small-pox and varioloid have been treated at the State Alms-House during the past three months, with but a single fatal result, and that was in the case of a man who was taken there in the last stages of the disease, from a neighboring town.

For further information concerning the Sarracenia see page 384 of "*New Homœopathic provings*."

Our Colleges.

We present extracts from the Annual announcements of our various collegiate institutions. The Cleveland professors say that "homœopathic physicians are everywhere in demand." We learn that this is true of the West, and we hope the remark is equally applicable to the eastern section of the country. *We cannot get homœopathic physicians here to fill the demand.* This should encourage students to diligent pursuit of their studies that they may become qualified to fill the places which are waiting for them. Students enquire of us "which school shall I attend." We cannot make a direct reply to such enquiries. Each school has something attractive to present which is peculiar to itself. Students can read the announcements and advertisements in our advertising columns and then direct their enquiries to the several Deans.

NEW YORK HOMŒOPATHIC COLLEGE.

Extract from Fifth Annual Prospectus and Announcement.

"Notwithstanding the depressing influences incident to the civil war now desolating our beloved country, this institution has steadily increased in strength, and is daily winning the respect and confidence of an enlightened people.

"The Faculty, actuated by no mercenary or selfish motives, have entered upon this good work with an earnest and hopeful zeal to place this Institution upon the broad and elevated platform of an enlightened and progressive medical science, in the hope that it shall be unsurpassed by any Medical Institution in the country, in the completeness of its curriculum of instruction, and in its practical advantages for acquiring a thorough and accomplished medical education.

"While the distinctive touching of this Institution has for its fundamental basis the law '*Similia similibus curantur*,' the student, nevertheless will be familiarized with the philosophy of the entire history of the medical science, with all its teachings and practical lessons are promulgated in our best standard works; thus, the student secures not only the same advantages afforded in any other Medical College, but the additional one of a careful and thorough instruction in the great principles of that advanced philosophy, which has within the past few years, so rapidly changed and elevated the character of the medical profession. This institution occupies, under the laws of the State a position equal to that of any other Medical Institution; and, by a special Act of the Legislature, has secured the right to its students, in common with students of other medical colleges, to walk the wards of Bellevue Hospital, and all the great public charities on Blackwell's and Randall's Islands, thronged as they are with hundreds of diseased and suffering poor, and where almost every disease with which the human system is afflicted, may be seen and studied in its varied stages."

HAHNEMANN MEDICAL COLLEGE.

Extract from Fifth Annual Announcement.

The Fifth Annual Session of Hahnemann Medical College will open on the 10th of October next, and will uninterruptedly continue until the 1st of March following. The General Introductory will be delivered by Professor Beebe. The curriculum of instruction embraces all the positive Sciences in any way connected with the Practice of Medicine and Surgery. In order to systematize the daily exercises of the College

in a way that will secure the greatest advantage for the Students, the labor is divided into eight departments, each of which will be represented by an experienced and competent teacher.

The spirit of progress that seems to animate the present age, is by no means wanting under the present arrangement in this Institution. The various branches will be taught and illustrated by means of the black-board, drawings, manikins, models, and skeletons, together with demonstrations from the recent subject, microscopic exhibitions, fresh specimens of medicine, minerals, plants and chemicals.

The Museum is supplied with philosophical and chemical apparatus and engravings, together with dry and wet preparations, illustrative of particular facts and operations in Surgery, Obstetrics, Pathology, Anatomy, &c.

In view of the obstacles in the way of Clinical instruction, (the city hospital, in which our school expected to have partial control, being at present occupied for military purposes,) a new and successful effort has been made to organize a clinical department of the College, that the students may be provided with that which is no less valuable in the way of instruction than they would acquire in the wards of a hospital.

It is therefore announced that the Dispensary in connection with the College will be open one hour each day for the reception of patients, under the supervision of Prof. Ludlam, aided by other physicians; to which the students will be admitted free of charge. Professor Beebe will hold a Surgical Clinic every Saturday, and Professor Ludlam will give a Clinical Lecture every Wednesday, from 1 to 3 p. m. during the term. Judging from the present interests, from ten to thirty patients will apply for medical aid daily, thus providing in a measure for clinical experience.

It will be seen from the foregoing announcement that no efforts have been spared to render the College in all respects desirable and acceptable to the profession, and that facilities for pursuing wide range of scientific studies are daily provided for.

CLEVELAND HOMŒOPATHIC COLLEGE.

Extract from Announcement.

The Trustees and Faculty of the Cleveland Homœopathic College congratulate its friends and patrons on the highly gratifying evidence of its continued prosperity.

We have from year to year advanced our standard of scholarship; improved and multiplied our means of instruction; strengthened our corps of teachers; and steadily increased our number of students.

Our class at the last session was larger than any year before in the history of the College, and ranked without a parallel in character and scholarship.

Homœopathy is rapidly gaining favor with the public. Homœopathic Physicians are everywhere in demand. Inducements for entering the profession were never so great.

This marked progress, in view of the continuance of the war which has embarrassed more or less nearly all the institutions of learning in the land, is surely auspicious for the future, and carries its own rebuke to the unfair, illiberal and exclusive patronage which has been given by the Government to the members of only one medical school.

The main return which the professors in our colleges receive for their expenditure of much time, labor and money, is the consciousness of doing something for the vindication and advancement of the good cause. The Colleges, therefore, can appeal to the Profession. Its true exponents they have a right to claim its exclusive favor and patronage, and a no less right to rebuke the looseness of opinion which makes Homœopathic physicians indifferent as to what School of Medicine they befriend.

There is a demand for a greater sympathy between the Colleges and the Profession. Let the profession take pains to fill the Colleges with judiciously selected students, and the Colleges will be quickened and strengthened for the great and arduous work.

We take great pleasure to be able to assure medical men that the Cleveland Homœopathic College is thoroughly prepared to qualify worthy young men in all which pertains to a comprehensive Medical education.

Our Hospital privileges will be greater than ever before.

By the liberality of Bishop Rappe this school will be admitted to the new Charity Hospital on equal terms with the other Medical Schools of the city. She same is true of the U. S. Military Hospital.

Owing to the large increase of our populations especially in the interests of manufactory, our Dispensary Clinic, will be greater than ever before.

HOMŒOPATHIC MEDICAL COLLEGE OF MISSOURI.

Extract from Third Annual Circular.

Notwithstanding the present unhappy condition of the country, and even with the calamity of civil war prostrating the energy of all institutions, whether commercial or scientific, the Board of Trustees of the Homœopathic Medical College of Missouri

have determined with renewed effort, to carry forward the enterprise they have inaugurated, and which thus far has proved so satisfactory to the classes heretofore in attendance upon the college.

The third annual course of lectures of the institution will be commenced under more favorable auspices than either of the foregoing, though, as will be perceived, an entire change of organization has been effected in the Faculty.

By referring to the names of the Professors, it will be found that they are *residents of the city of St. Louis*, a fact sufficient in itself to guarantee to the student *REGULARITY* in the order of exercises. As to the capability of those occupying the respective chairs, judgment can alone be passed by those who listen to their teachings, attend the examinations, walk the wards of the hospitals, and receive the degree of the College.

Those who desire to obtain a thorough medical education, will be pleased to learn that the new and commodious Good Samaritan Hospital, one of the largest and best arranged institutions in the country, possessing accommodations for two hundred patients, and having all appointments for medical, surgical and ophthalmic clinics, is opened for the benefit of the students of the college, and that *REGULAR* clinics will be held in the different departments by the Physicians of the Institution.

In addition to this a large Military Hospital, under the immediate and entire control of one of the Professors, will be open to the class in attendance. In this institution there are from 125 to 150 cases per month. All the diseases and injuries incident to camp life will be brought to the notice of the student, who will be enabled to observe the effects of Homœopathic Medicine in this very important class of diseases.

It is the intention of the Professor of Surgery, to give especial attention to gun shot injuries and their consequences, and he will illustrate the course by wet preparation prepared by himself during his term of service in the army.

HOMŒOPATHIC MEDICAL COLLEGE OF PENNSYLVANIA.

We learn from the Amer. Hom. Review that the 17th Annual announcement of this college has been issued. We have not been favored with a copy.

NEW YORK MEDICAL COLLEGE FOR WOMEN.

We are much gratified at being able to direct attention to a *Homœopathic Institution*

for the Medical Education of Women. The New York college presents many attractions to those who wish to qualify themselves for treating the diseases to which their sex is particularly subject. We are very well satisfied that there is a peculiar fitness in this; and in no other college, that we know of, do we think, a woman can obtain better facilities for the acquisition of requisite knowledge than in the one we are now referring to. We hear Mrs. Lousier recommended very strongly indeed, and we know that Professors Ellis, Dunham and colleagues are well qualified for their respective chairs.

THE FIRST FEMALE MEDICAL PRACTITIONER IN ENGLAND.

After a desperate struggle against numerous obstacles, Miss Garratt has at last found her way to a medical examining board, has passed her first examination, and become what our cotemporary the *Lancet* was pleased to designate the "Pet of the apothecaries." Without pretending to know too much of the secrets of an examining board, we may state that Miss Garratt's examination reflects upon her the highest possible credit, and that in both the written and oral parts of it she displayed an accuracy, a precision and abreadth, which surprised the examiners, and which are rarely seen in the court. In chemistry she wrote an essay on the meaning of the term "specific gravity," entering most carefully and minutely into the *rationale* of the process, and supplying even the mathematical formulæ for calculation. She wrote a second essay on isomorphism and isomerism, adducing copious illustrations of isomorphic and isomeric bodies, and giving the modern view on those points. In anatomy, she described, we believe, without a single error, one of the most difficult portions of the brain; and in physiology she rendered with equal skill and perfection an account of respiration. This was the written ordeal. In the oral—botany, materia medica, the uses and composition of drugs, anatomy, physiology, and chemistry, were subjects of trial; in all of which she evinced an equally sound advancement, and we know that the examiners were specially struck with the fact, that while Miss Garratt's learning was so well shown, the manner in which it was displayed was collected, natural, and tinged with no approach to affectation. When we consider the immense difficulties under which this young lady has acquired her knowledge, when we state what we are assured is the fact, that her lessons in anatomy have been taken almost at midnight, when all the male students had departed; and when we are informed that

at this moment she is actually acquiring her hospital practice in the humble capacity of a nurse at the "London," we cannot admire too heartily the perseverance, courage, and self-sacrifice that have been manifested. Miss Garratt, in our opinion, deserves, and has fully earned, admission to the same honors as any other praise-worthy student of medical science and art, and we think it the narrowest policy for any college or board to refuse her examination. We make the above observations, still holding an opinion which we have before expressed, that it is quite an open question whether women generally can follow medical practice as a means of livelihood; but we contend that they ought to be allowed to try. Then if their efforts fall through of themselves there is no one to blame. But flatly to deny them the opportunity of making the attempt is simply to excite a public sympathy which scarcely can be said to be misdirected, and which is far more injurious to the medical profession at large than the introduction into their ranks of any number of female practitioners.—*Social Science Review*.

Probing.

PROVING OF GNAPHALIUM.

Species: Polycephalum, Uliginosum, Margaritaceum.

English Synonyms: White Balsam, Indian Posy, Sweet-scented Life-everlasting, Old Field Balsam, Cud Weed.

Natural Order: Asteraceæ.

Sex Syst.: Syngenesia superflua.

The plant is indigenous, herbaceous, and annual, with an erect, whitish, woolly, and branching stem, from a few inches to a foot high. The leaves are alternate, sessile, linear-lanceolate, acute, entire, scabious above, whitish and woolly beneath. The flowers are yellow and tubular; in heads clustered at the top of the paniced, corymbose branches.

The Gnaphalium was formerly deemed to contain three species, as indicated above: but the *G. margaritaceum* more properly belongs to the class *Antenaria*; and it was reckoned a member of this genus more from its general similiarity than from any strict botanical resemblance. Moreover, the only perceptible difference between the *G. polycephalum* and the *uliginosum* seems to be in development; the former being more perfect, and thus may be considered the proper type of the genus.

History.—It is found in all the northern and eastern parts of the United States and Canada, in old fields and dry barren lands, in old gravel-pits, by the roadside, &c. It

flowers in July and August, bearing a whitish-yellow flower. The leaves have a pleasant, aromatic smell, and an aromatic, slightly bitter, and astringent taste.

Allopathically, it has been recommended as a diaphoretic; also in quinsy, and in various pulmonary diseases; in leucorrhœa, and in diseases of the bowels. The officinal preparation is an infusion. It has been applied as a fomentation to bruises, indolent tumors, &c.

The fresh juice has been deemed antiaphrodisiac.

From the provings which have been made, we are led to believe that its sphere of action is not extensive; that, in its action on the healthy system, it is generally slow, though its curative effect are manifested with promptness. Its sphere of action seems to be in those diseases dependent upon an irritated or relaxed condition of the alimentary canal,—such as diarrhœa, cholera-morbus, cholera-infantum, and especially the diarrhœas of children occurring during the heat of summer, and characterized by copious watery and exhausting discharges, with or without griping or nausea, and which frequently prove so intractable during dentition. This conclusion is not merely theoretical, but has been confirmed by the experience of many physicians of Boston and vicinity.

In the following provings we have individualized each case, and given, as exactly as possible, the order in which the symptoms occurred.

Proving by Dr. Woodbury.—Aged twenty-nine; dark hair and eyes; in perfect health. Sept. 10, 1860, took, one hour after breakfast, fifteen drops of a saturated tincture of *G. ulig.* Experienced during the day unusual rumbling (*borborygmus*) in the bowels, with slight griping pains: in the evening, a diarrhœic stool, with uneasiness in the bowels until falling asleep. 11th and 12th, no symptoms; natural stool as usual. 13th, took twenty-five drops on retiring at night. 14th, diarrhœic stool early in the morning, and a second before noon, with pain and rumbling in the abdomen, diminished urine, loss of appetite and taste. 15th, bowels constipated; no stool; urine natural, also appetite and taste. 16th, took fifty drops on retiring at night; diarrhœic stool, very copious and watery before morning, and two before noon of the 17th. Nausea and pain in the abdomen of the 16th; urine scanty as before. 18th, dark-colored, liquid, offensive stool at the usual hour in the morning: the pain in the bowels continued nearly all day. 19th, bowels constipated, no pain, appetite and taste natural. 20th, ditto. 21st, bowels natural again. 22nd, took a half-ounce of the *G. polycephalum* at

night on retiring. Three loose and watery discharges, with great pain and nausea, before morning. 23rd, profuse diarrhoea, attended, attended with great pain in the abdomen all day; urine scanty and red as before; great weakness and prostration as the result of the diarrhoea. 24th, discharges more natural; less pain. 25th, no symptoms; bowels natural.

I now discontinued my experiments upon myself, as I found that the increased doses produced no new symptoms, but only increased to an uncomfortable degree those developed by the previous and smaller doses.

Mrs. S———. —Gave fifteen drops to each of three children, aged respectively four, six, and eight years, and on retiring at night. The two older children had diarrhoeic discharges in the morning, and several times during the day following, attended with great irascibility of temper, and pain in the bowels. The youngest had vomiting and purging, like cholera-morbus, before morning; and the purging continued through the next day, at intervals of increasing length.

In all three cases, constipation, continuing two or three days, succeeded diarrhoea; during which time the children were indifferent, almost to aversion, to food, and very irritable.

The children were all healthy and strong.

Mrs. S., aged forty years, mother of the little provers just mentioned, has dark hair and eyes, uniformly well, but inclined to constipation; took, first ten, then fifteen then twenty-five, drops of the *G. ulig. tinc.*, without perceptible effect; then took sixty drops, which caused a copious diarrhoeic discharge, preceded and attended with nausea, pain and rumbling in the bowels. The pain and *borborygmus* continued for two days. She declined to experiment any further.

The medicine was taken by two other provers; but no new symptoms were elicited, although most of those already stated were confirmed by them.

Dr. Chase made several provings of this drug upon himself, in doses of from forty to sixty drops; the results of which were fully confirmatory of those already stated. The same is true of the provings made by Dr. Talbot and others.

Highly satisfactory clinical results, in accordance with the above pathogenesis, have been furnished by Drs. Gregg, Walker, Scales, Talbot, Chase and others; in whose hands it was remarkably successful in the treatment of cholera-infantum and kindred diseases.—(*Publications of Massachusetts Hom. Society.*)

MEDICINE NOT AN ART.

"Medicine is not an art, reared up by the philosopher in his closet; it is not a system depending upon laws mathematically worked out, but a grand embodiment of facts, obtained by experience, observations, tests, and patient trials, and as such worthy of its most devoted and exalted practitioners and patrons. The effects of medicinal agents in the management of disease have been, and will continue to be, ascertained and made positive not by any course of argumentation, reflection, or reasoning, but by the better mode of test and trial. By what kind of reflection and reason may I ask, could the conclusion have been attained that ether, by being inhaled, would produce perfect unconsciousness, and perfect freedom from suffering during the most severe and prolonged surgical operations? How long would sick and suffering humanity have been denied the greatest boon of modern medical discovery if it had waited for the discovery of the anæsthetic effects of the vapor of ether, until "reflection and reason" alone should have worked out its wonderful power over the economy? Experiment, test, trial, did the work, and humanity reaps the rich harvest from the labors of the practical, experimental, pains-taking, trial-making physician, and not from the mere theorist. And here, *en passant*, I cannot but remark how vain have been the efforts of those who, depending upon "reason and reflection" alone, labored to prove the injurious, unsafe, nay, deadly effects of the Letheon. Before the crushing evidence of test and trial the finely spun arguments of the mere reasoner gave way, and another established fact was added to medicine."—DR. A. NEBINGER.

Miscellany.

A DROP OF LIQUID.

When medical men prescribe so many drops of any liquid to their patients, they may not be aware that they do not always prescribe the same quantity. On this subject we find an interesting paper by T. Tate, Esq., in this month's "Philosophical Magazine," in which he shows that the magnitude of a drop depends upon various circumstances generally not taken into account. First, as to the apparatus used by him for his experiments, it consists of a vertical tube AB receiving the liquid at A from a vessel C, delivering it at B into a vessel D. The vehicle by means of which the liquid passes from C into the tube is a strip of clean calico, which acts as a syphon. The apparatus was so adjusted that the interval of time between the falling of any two consecutive drops was not less than forty seconds. The lower end B of the dropping-tube was brought to a point, and then formed into a sharp edge, so that the tube at the part in contact with the liquid might be regarded as infinitely thin. From five to ten drops

were allowed to fall into D, which was then weighed, by which means the weight of each drop was ascertained. In order to determine the weight of the drop corresponding to different temperatures, the dropping-tube was inserted in a wide brass tube passing through a hot-water bath, so that the drop of liquid as it was being formed might attain the same temperature as the water surrounding the wide tube. From the experiments made with this apparatus it appears—1, that other things being the same, the weight of a drop of liquid is proportional to the diameter of the tube in which it is formed, but not of its orifice, provided the diameter does not exceed seven-tenths of an inch, in which case the liquid falls, but not in the shape of a regular drop; 2, that the law just enunciated has a remarkable relation to the capillarity, the weight of the drop being in proportion to the weight of water which would be raised in that tube of capillary action; 3, that the augmentations of weight are in proportion to the diameters of the surfaces on which the drops are formed; 4, that the weight of a drop of liquid, other things being the same, is diminished by an increase of temperature; and 5, that in different solutions of neutral salts the increment in the weight is in proportion to the dry salt in solution.—*Galignani*.

CALL FOR A MEETING OF THE HOMŒOPATHIC PHYSICIANS OF OHIO, TO ORGANIZE A STATE MEDICAL ASSOCIATION.

We, the undersigned, impressed with the importance of securing a thorough organization of the Homœopathic Practitioners of the State of Ohio, in order that they may be mutually benefited by such association, and that their influence may be felt as a united body representing a great and widely spreading medical reform, and, furthermore, that they may, in the power which unity of purpose and unity of action ever exert, demand a consideration at the hands of the National and State authorities of the claims of Homœopathy to a representation in the army and navy, as well as the various local public institutions of the land,—do hereby invite our brethren throughout the State to meet in convention, in the city of Columbus, on Thursday, the 13th day of October, 1864, for the purpose of organizing a Homœopathic Medical Association for the State of Ohio.

Jacob Bosler, A. Whipple, E. C. Witherill, Robt. R. Lynd, C. M. Kramer, Jas. G. Hunt, A. Bauer, T. C. Bradsford, F. B. Fesler, G. W. Bigler, D. R. Kinsell, J. B. Hall, Prof. A. O. Blair, Prof. John Ellis, B. Cyri-

ax, D. H. Beckwith, John Wheeler, J. B. Hutchinson, W. J. Clary, G. W. Barnes, E. G. Painter, B. Bryant, J. H. Briscoe, Seth Freeman, L. W. Sapp, Prof. T. P. Wilson, P. P. Hoyt, Charles Cropper, W. Webster, E. B. Thomas, M. H. Slosson, W. C. Leech, J. H. Pulte, Jesse Garretson, J. M. Terry, G. S. Blackburn, C. Ehrmann, D. W. Hartshorn, Prof. H. P. Gatchell, Prof. John C. Sanders, Prof. Geo. W. Betteley, J. T. Westover, G. S. Hill, Prof. Alex. W. Wheeler, G. Lind, C. Morrill, Prof. G. Brainerd, Charles Osterlew, J. B. Massey, G. W. Storm, P. Mathinet, Prof. S. R. Beckwith, C. C. Olmstead.

PREAMBLE AND RESOLUTIONS CONCERNING THE INTRODUCTION OF HOMŒOPATHY INTO THE UNITED STATES MILITARY HOSPITALS.

BY T. R. NUTE, M. D.

Whereas authentic statistics show, that the treatment of cholera in Europe in 1831 and 1832, the homœopathic and allopathic systems of medicine, in private practice in ten cities, contrasted with hospital practice in twenty-one hospitals, were successful in proportion of eighty-nine per cent of the former to thirty-seven of the latter; and, throughout the Austrian and Bavarian dominions, is that of ninety-three of the former to a fraction less than thirty-seven of the latter; also in 1847 and 1848, in hospital practice, contrasted with hospital practice in Vienna, Bohemia, Hungary, Russia, Poland, and Egypt, in that of ninety-one of the former to forty-eight of the latter; in France, in 1848 and 1849, in that of ninety-one of the former to forty-nine of the latter; in St. Petersburg and in Austria, in that of ninety-two of the former to forty-seven of the latter; in 1849, in Cincinnati, New Orleans, St. Louis, and Sandusky City, in that of ninety-three of the former, to fifty-three of the latter; and in the southern part of France, at a still later period, in that of ninety-three of the former to ten of the latter:—

And whereas authentic statistics show, that, in treatment of yellow fever in the southern part of the United States in 1853, the homœopathic and allopathic systems of medicine, in hospitals of New Orleans, Natchez, Havana, and Barbadoes, were successful in proportion of ninety-three per cent of the former to fifty-one of the latter; in an epidemic fever, known as the war typhus, which devastated many districts of Europe in 1813, in private practice, contrasted with hospital practice in Liepzig, in that of a hundred of the former, of the hundred and eighty-three cases submitted, to an almost entire failure of the latter; in inflammation of the brain and of the bowels, in

dysentery, pneumonia, and pleurisy, combined, in hospitals of Vienna, in that of ninety-seven of the former to eighty-three of the latter; in dysentery, which attended the Irish famine in 1847, in hospitals of Ireland, in that of eighty-six of the former to sixty-four of the latter; in the continued fever which accompanied it, in that of a fraction more than ninety-eight of the former to eighty-seven of the latter; also by a third method, which prohibited all medication, and relied wholly upon the recuperative powers of *Nature*, aided only by cleanliness, ventilation, and good nursing, of ninety per cent:—

And whereas authentic statistics show, that, in treatment of an epidemic of inveterate ophthalmia and skin disease which broke out in the New York Protestant Half-orphan Asylum in 1842, the homœopathic and allopathic systems of medicines were successful in proportion of a hundred per cent of the former, of the two hundred and forty-three cases submitted, to almost an entire failure of the latter in a previous trial of several months' duration; and in all diseases occurring in this institution for the last twenty years, contrasted with those occurring during the seven previous years, in that of three of the former to one of the latter; also in all diseases, exclusive of cholera, in general hospitals of London, Edinburgh, Glasgow, Liverpool, Vienna, Liepzig, and Linz,, in that of ninety-six of the former to ninety of the latter; and in all diseases occurring in the great military hospitals of Vienna and St. Petersburg, and in five other hospitals of Hungary and Vienna, in that of ninety-five of the former to eighty-seven of the latter:—

Therefore resolved, That Congress should make requisite provisions for the introduction of the homœopathic systems of medicine into a part of every established military hospital, for the following reasons, viz.:—

1st, Because carefully gathered statistical collections prove it to be more successful in treatment of all diseases incident to the military camp and the hospital than the allopathic system, which is almost exclusively employed in the army and navy.

2d, Because it is ardently desired by many of the troops in the service, and provision for its introduction is a step toward their just rights, and a fitting response to the numerous signed petitions in its behalf which have come up from the people of every loyal State.

3d, Because to withhold from them this obvious right, and, in the hour of their peril, to force upon them a system of medicine which they at home invariably reject, tends to demoralize the will, dishearten the sick,

and thereby to cruelly diminish chances of recovery.

4th, Because it is better adapted to the the varied wants of troops detailed to service, from the compact and portable form of its remedies, the simple and easily acquired principle of their prescription, and the obvious analogy of their therapeutical action to the known operations of *Nature*.

5th, Because the joint adoption of this rival system would afford to the present corps of army surgeons a wholesome stimulus to emulation, and prove an incalculable blessing to self-sacrificing fellow citizens in arms for their country, who may be stricken down by disease or casualty.

6th, Because, as a system of medicine, it has firmly established itself wherever civilization is known, and now numbers its adherents by millions from the ranks of the most intellectual and conservative classes of every land.

7th, Because it has, for half a century, stood the most searching tests of observation and experience, and, notwithstanding the bitter persecution of its opponents,—the allopathic school,—has made for itself an imperishable name and place among the nations of both hemispheres.—(*From Transactions of the Massachusetts Hom. Society, 1861-2.*)

ON THE INSIGNIFICANCE OF THE PATHOGENETIC AND NOSOLOGICAL SYMPTOMS WHICH DETERMINE THE CHOICE OF THE REMEDY.

By PROFESSOR HOPPE, of Basel.

From Allg. Hom. Zeitung, vol. 68, page 105.

In Homœopathy it has not yet been brought forward with sufficient emphasis that the determining symptoms, both of diseases and of the provings of the medicine, make their appearance in what in many respects are insignificant, nay even very insignificant, and unimportant form. This fact has not, indeed, passed unrecognized in homœopathy, but it has not been noticed with sufficient distinctness, and thus its importance and the apparent anomaly of the circumstance has not been fully appreciated. For when it is taught, that in the examination of the patient we must go to work in a sharp and penetrating fashion, and search unweariedly till we find the deciding peculiarity, this recommendation clearly implies that these peculiarities do not lie on the surface, but take an insignificant and apparently unimportant form. And when further it is taught in what manner provings must be made in order to allow the pure symptoms to develop themselves and not be concealed or suppressed by accidental phenomena, and also to observe them without disturbance

it likewise plainly follows that the deciding, instructive, and important symptoms do not always force themselves upon the attention at the first glance. Hence it has been well understood that the deciding symptoms frequently occur almost unobserved. But most of us have timidly, as it were, rather kept this fact to ourselves, and have not put it forward in the first rank as a rule for practice; we have silently given it an importance which we did not venture to pronounce openly in a clear, loud, and sharp manner. And we have acted thus timidly because we have looked upon it as a kind of immaturity and imperfection, that we should be obliged so often to depend upon such insignificant and unimportant symptoms. But whoever was thoroughly initiated into this open mystery, that just the deciding symptoms were insignificant, and took advantage of it, at once distinguished himself by peculiar knowledge and skill; so much so that he again fell into the opposite danger of laying more stress on insignificant and hair-splitting distinctions than the progress of science has *as yet gone far enough to justify*—an evil which, when duly investigated, may show error on the part of individuals, but can ultimately only do good to science. Let us, therefore, pronounce decidedly, loud, and openly, that the determining symptoms frequently make their appearance in an insignificant and unimportant form, and let us make a formal demand that in the provings and examination of patients the insignificant symptoms should not be neglected, but, on the contrary, observed with peculiar care. It is *true* what we say here: this truth has its analogy in all departments of science, and it has its necessary foundation.

A slight shooting or boring in the teeth in the proving of a medicine, a little stronger beat of the heart, a trifling pain in the throat, a somewhat unpleasant taste in the mouth, which is repeated only at long intervals, a little alteration of the stools, a somewhat copious perspiration, a somewhat depressed or excited state of the spirits, &c.; these are the phenomena to be observed, and to a certain extent it is primarily from these that the whole picture of the disease or the proving are put together. And has not also the diagnosis of diseases its difficulties and fine distinctions? Is the diagnosis of Iritis so glaringly obvious to the senses? Is that of pneumonia so grossly palpable? or the distinction between diphtheritis and catarrh always so striking as it usually is in the fully developed cases? There are also here phenomena which occur in an insignificant and unimportant manner, which are, nevertheless, often of such consequence that they are the turning point in the decid-

ion. And as in diagnosis, so in microscopy, so in all medical rules, so in all sciences, and also in all things of daily life. Where no glaring facts stand out prominently there must be investigation, and that must direct itself to the insignificant circumstances, which in the nature of things must occur more frequently than the striking ones, but are often more important. And if the coarser changes in and about the tissues are often little developed, *how much rather* must this be the case with *such* phenomena as give only the subjective expression of excited action of the tissues. For these insignificant and apparently unimportant phenomena, which are often of such consequence, are expressions of tissue-action. These are the inceptive phenomena, and they are therefore likely enough to be wanting when the morbid process has attained its full development; they are wanting *e. g.* in a fully developed pneumonia, while they are still present at the beginning of the same and could betray the peculiarity of the irritation in progress. The "peculiar," the "proper" symptoms are those which are to be considered as the determining ones; but one must not thereby forget and reiterate the fact that these may be very insignificant and are, in fact, mostly to be sought in the ranks of small, little striking phenomena. Therefore without any timidity we admit those into our field of investigation. What microscopic observation is in small objects, that is in semiotics the scientific investigation of the small subjective and objective phenomena of disease; and whoever is unable to work in the field of the small and the fine, will never be a master here any more than there. The more mature intellect ventures into the depths, whose bounds are innumerable and whose results readily appear to the uninitiated to be insignificant, unimportant, petty, and fruitless.—*Br. J. of Homœopathy.*

CONTRIBUTOR REMLASS' PAPER No. 8. TRIALS OF A COUNTRY PHYSICIAN.

Ever sought for, yet unpitied worker of the forest, list awhile until a few of thine ever-occurring trials are put before the public, let us attempt to show them up to, a part of the world, in their natural colors with the hope of getting at least a sigh of pity from the not otherwise fortunate brother, the city practitioner, (saying naught concerning the equally valuable services of that city functionary,) turning our whole attention to our country brother.

We find him, a person whose aid is ever required in the chamber of the sick; at the bedside of the poor as well as the rich; he is one whose life is not his own; whose only

business it is to answer the call of humanity, and minister to their wants; whose ill, he is ever expected to mitigate, and of all the callings through this vast universe from

"Icicles to the pole."

There is perhaps none fraught with so many peculiar circumstances calculated to destroy the bodily comfort of the poor Doctor; his repose is never his own; he is everybody's servant, whoever may require his aid. Night after night he passes in the chamber of the sick, at the bedside of the dying, until at last, fatigued and wearied, a seeming respite comes—a night long sought for arrives when the wearied physician lays his throbbing head on his pillow under the genial roof of his own house, in the hope—vain hope—of getting a few hours sleep though ever doubting, ever expecting to hear the dull, heavy and everlasting rap-tap-tap of the knocker, or (to him) hardly less hated sound of the bell, but even this disturbance is thought slight as long as the cited occurrence happens on a cloudless night, with its silvery moon showering down its almost liquid light; and even on a dark night the poor Doctor has cause to be thankful, & thankful, the memory of pitchy darkness, with perhaps roaring winds, drenching rains being fresh on his memory or perhaps nor-westers blowing stiff in the face with sleety rain and ten or fifteen miles through a backwoods, being not less vividly impressed on the tablets of his memory—trials it is true, he is not prone to forget.

Even after returning from one of these jaunts on a night such as the one just cited, the wearied and half sick Doctor is often called upon to visit another patient, perhaps in a direction opposite to the one just come from, with the consolation of having a continuation of the same comforts (1) he must obey the summons he must leave all the snug comforts of his own house, and brave the storm without—perhaps things progress further than the above—the physician has retired—even gets in a dose in bed—when all at once as if by magic, he imagines he hears the ponderous knock, he instinctively raises his head from the pillow, in the hope of its being only a deceive; but ah, its one of the sad realities talked of, for the knocking commences again, this time louder than before, the summons is answered, the anxious visitor makes a few hasty remarks, and lo-and-behold the first thing the physician knows he wakes up flooding himself on some road, he hardly knows where till he thinks a little, and collects his scattered thoughts. And so the country Doctor lives on with a mind never at ease, anxiety being ever his companion; and more, he is a stranger to all kinds of amusement for no matter

what pleasure he is enjoying, or what comfort he is participating in, whether contemplating the works of nature, in solitary seclusion, or being one among a party of frolic-makers, it is all the same, his footsteps are ever dogged, his whereabouts are ever known, and the call of the sick admits of no delay. Yet this poor persecuted mortal (fellow physicians please excuse the term) has the consolation that his work is a noble one, his mission it is to minister to the wants of suffering humanity, and when his well earned fee affords him (as it usually does) a sufficiency he lives on perfectly happy, rejoicing in the pleasure of his being able to do good. Here let us leave him, though his future life would afford us some interesting items, and perhaps some of the correspondents of our ever welcome "Observer," will be pleased to give us something concerning his life when silvery locks shall grace his brow. Who'll answer?

Students' Department.

A WORD TO STUDENTS.

BY D. J. EASTON, M. D.

The study of the pathogenetic effect of Homoeopathic remedies as laid down by Jahr, presents itself to the mind of the student in a manner so complicated and perplexing that it becomes extremely embarrassing to him to trace out with certainty the action of each remedy. To obviate this difficulty, I recommended to students under my charge, the following classifications of the properties of certain specifics therein given, which renders the study of the Homoeopathic Materia Medica clear and comprehensive, so far as those similarities and differences are concerned.

Many years experience has led me to feel confident that the classifications will naturally abridge the labors of the student, in bringing him to an accurate understanding of their uses, properties and application.

Aconite acts above all other known remedies, upon the circulatory system. Its effects in acute inflammatory affections and fever are truly wonderful.

Arnica acts upon the absorbents, and is consequently admirably calculated to promote the absorption of effused blood and the reparation of tissues after mechanical injuries.

Belladonna exerts a very powerful action upon the brain and its membranes, and is inferior to no other medicine in this respect. Its action upon glands, is also very remark-

able—it is in fact to the glandules almost what Aconite is to the circulation. The lining mucous membranes of the throat is susceptible to its influence.

Bryonia acts upon the *muscles* and especially upon the *fibrous tissues* of the joints, it is admirably adapted to the treatment of rheumatic cases, in which the sufferings are aggravated by motion. Its action upon the lungs and upon the muscles, associated with the organs of respiration render it of essential service in most kinds of cough, catarrh of the chest, especially at the commencement of said diseases.

Chamomilla is peculiarly the medicine of *infancy*; it is also adapted to the *female* constitution.

China and *Arsmic* are invaluable remedies for sustaining the vital powers under repeated losses of the fluids and the solids of the body.

Hepar Sulphur is pre-eminent in its action upon the exhalents of the skin, and consequently, should be given to promote perspiration, when indicated by nature. The property which it possesses of *favoring suppuration* is no less worthy of notice.

Arsenic, *calc. carb* are all remarkable for the long duration of their affections, and also, for their deep and searching effects upon almost every organ and tissue of the body. *Graphites* and *Sulphur*, on this latter account they are usually classed among the Anti-psoric remedies, which are essentially necessary in the treatment of all constitutional affections of long standing. They differ from each other in the predilection which they individually manifest for certain organs or tissues. Thus *calc carb* has a more marked action upon the *glandular system generally*, and especially upon certain portions of it, than *sulphur*, which exerts a greater influence upon the skin—the sensations which attends their actions differ. Thus, the aggravation of *Arsenic* is accompanied with burning sensations, whilst that of *Sulphur* is manifested by extreme itching.

CAUTION.—All these medicines should be very *sparingly used by Amateurs*, as the aggravations consequent upon their abuse, are not speedily removed.

Isnatia, this remedy holds a middle place between *Nux Vomica* and *Pulsatilla*.

Mercury is a most remarkable medicine for its action upon mucous membranes—the glands and the liver—it is very useful in disorders connected with the digestive organs and *glandular system*—like *Hepar sulph.* it acts upon the skin and favors the suppurative process, but in a less degree.

Nux. Vomica has a very marked action upon the nervous system generally, but especially upon the spinal chord, and upon those nerves connected with the digestive

organs. In cases of inaction of the bowels, dependent upon want of nervous energy, it acts most admirably.

Opium is of the greatest importance in the treatment of certain lethargic states of the brain

Pulsatilla has many points of resemblance with *Nux vomica*, in its action upon the nervous system and the digestive organs. Its action upon the mucous membranes is however much more marked. It is very generally indicated in the treatment of similar affections of the bowels and stomach, when the tendency is rather to *relaxation*, than to constipation.

Rhus Tox acts upon the same tissues as *Bryonia*, but more especially upon the tenderous structures, and cartilages of the joints; hence its value in the cure of sprains of said parts. It is always indicated in the treatment of rheumatism which is *relieved by motion*.

Personal.

DR D. H. RUNYAN.—We clip the following notice concerning Dr. Runyan, formerly of Detroit, from the *Elkhart Review*: “Dr. Runyan has returned home from the army of the Potomac, whither he has been for the past two months, performing the office of good Samaritan to the heroes who are fighting for our country. We have seen a private letter from Washington, from which we make the following extract in regard to the Doctor's efficiency:

“Dr. Runyan has labored very assiduously during the two months he was with the army, and received very flattering testimonials from the army Surgeons under whose supervision he performed his duties. I saw a couple of the testimonials, and they speak in the highest praise of his skill, kindness and attention to the sick and wounded. He had a rough time of it and deserves consideration for his successful efforts in alleviating the sufferings of our brave soldier boys.”

BOOKS TO BE NOTICED.

We are in receipt of several books for review, which will be noticed in the October No.

What drug are you proving?

Homoeopathic Observer.

Vol. I.]

DETROIT, OCTOBER, 1864.

[No. 10]

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Reviews & Book Notices.

New Remedies, their Pathogenetic Effects, and their Therapeutical Application, in Homœopathic Practice. By E. M. Hale, M. D. Late Lecturer on Mat. Med., and Therapeutics in the Hahnemann Med. College, Author of "Monograph on *Gelseminum*, etc. etc. Detroit, Mich.: E. A. Lodge, Homœopathic Pharmacy, 1864.

When we are anticipating pleasure for some time, we are very prone to have our expectations disappointed; but, when our ideas, that have been constantly upon the *quiver*, are fully realized, the feelings of satisfaction are only equaled by our thankfulness to the person who has afforded us the gratification. So it is with Dr. Hale's work; and, so far as our time has allowed its perusal, we find that he has given to the Homœopathic profession a fund of information concerning certain powerful remedial agents, many of which will certainly be ranked among our polychresis. That

the actual pathogenesis of many of the drugs are imperfect, the author of the work unhesitatingly admits; but, that others have been quite carefully handled, no one will pretend to deny; and that a collection of facts, a vast amount of clinical experience, and a great deal of matter, new to most Homœopathic physicians, are embodied in the volume, is evident upon a cursory glance at its pages. We have no doubt there will be some who will immediately begin to take exceptions to the work because of the sources from which part of the information recorded has been obtained; but to the majority of the profession,—to those eager for truth, and who embrace it wherever found, the book will be received with pleasure, read with advantage, aye, and be referred to also when many of the older drugs of the codex have failed to answer the expectations of those who have employed them. To those who thus are willing to be hypercritical, and who find it so hard to be *charitable*, we would only say, that, before they criticise too severely, let them do as much for the profession as has been accomplished by the author of the "New Remedies," and, after such labors, their words will have more weight with the reading, thinking and working Homœopathists of this country.

It is astonishing to find how the labors of very many of our best men have been brought into requisition, and how many good allœopathic and eclectic authorities have been consulted to bring out the clinical experience of the new drugs that are commented upon. For instance, we find in the proving of *Æsculus Hippocastanum*, the labors of H. M. Payne, Boyce, Warren and Burt. In the proving of *Apocynum Cann.*, the experiences of Freligh, John F. Gray, Alley, Marcy, Okie, Watson. *Caulophyllum* has been proven and used successfully by Drs. Ludlum, Hale and Burbank. *Cimicifuga*, by Marcy, Paine, Hill, Douglass, etc. *Eupatorium*, by Jeanes, Neidhard, Gray, Williamson and Douglass. *Gelseminum*, by Wells, Lazarus, Hale, Holcomb, Douglass, Ludlam, Neidhard, Morgan, Davis and Marcy. *Hamamelis*, by Hering, Okie, Preston, Burritt, Burnett, Cushman, Davidson and Barrows. *Iris Versicolor*, by Burt, Rowland, Kitchen and others. *Podophyllum*, by Williamson, Hering, Marcy, Jeanes, and Hill. *Rumex*

Crispus, by Joslin, Payne, Small and Dunham. Sanguinaria, by Bute, Halfrig, Hering Hunt, Neidhard, etc.

These few from the many prominent Homœopaths are selected merely to show the extensive field from which Dr. Hale has culled his fruits; and the whole has been arranged and interspersed by the author with most valuable information. In this work, we hope there will be found an agreeable re-union for both high and low dilutionists, and that each will put it to "the inexorable test of honest trial."

We predict for it a large sale and a revised edition, before many months. [*Western Homœopathic Observer*. (Prof. W. T. Hel-muth).]

Dr. M. M. Gardner says: Your work "New Provings of indigenous remedies," by Hale, came duly to hand and from what I have perused of it I judge that is valuable. Having formerly been an Eclectic, I can appreciate it the better, since I know the inestimable value of that class of remedies, after an experience of five years in each practice. I hope it will meet with a great sale and be the means of waking up old line Homœopaths to the value of remedies they have so long discarded."

Dr. C. H. Lee says: I find on perusal of the "New Provings," that it is a good work. Would that our whole *Materia Medica* was presented in the same form. It would be a pleasure to read such a work, how broad its basis, how sure a superstructure resting on facts; no new discovery could alter it; no new theory could overturn it. We should then have a *Materia Medica*, of which Homœopaths would be proud. All praise to Dr. Hale for his labors.

"I think Dr. Hale has placed the homœopathic physicians under great obligations to him and I for one return him my thanks."

Prof Dunham writes, "The volume furnishes me just the information I desired, but knew not where to get, respecting a number of new remedies, that are being more or less empirically used all around me. There is certainly much much more to be learned about all these remedies, but I think you have succeeded in putting into a very accessible and practicable form all that is yet known (and this will be a stimulus to new provings.)"

Prof. Ad. Lippe writes: "The profession must take the appearance of this work as a

progress in our science and as a sign of development and future greatness."

Prof. Barlow says: "I regard the work as a valuable addition to our stock of knowledge of the *Materia Medica*. True, some of the provings are not exactly what we all should have wished, but time and further trials will perfect them. There are in the work at least a dozen records, either of which, to the student or practitioner, are worth twice the cost of the whole volume. If each practitioner or advanced student now in the United States would do a little in the way of augmenting and improving our *Materia Medica*, we could have in two year's time an amended and perfected work on the *Materia Medica*, such as I fear the next half century will not give us. Why cannot some mode be devised for bringing all up to the good work?"

Prof. A. O. Blair writes: "I am pleased with the great industry of Dr. Hale. If all our young men were as earnest and ambitious as he is, a new era would dawn upon our science. Of course all of the remedies are not fully proved. But enough is known of many of them to help us much toward obtaining a pretty good picture of cases in which they may be used. Hale is entitled to our thanks. I expect to derive much help from his suggestions. *It is no small labor to collect such an amount of material from so many different sources and arrange them in such an orderly and useful manner.* Hale was one of my students, and I feel proud of his attainments. I cannot say more of the work at this time as I have devoted only an hour or two to reading it. When I have more time to read it more generally and carefully, I shall be glad to give a more extended notice of the work for publication if you desire it."

NEW HOMŒOPATHIC PROVINCE.—Such has been the favor with which the book on *New Remedies* has been received by the profession that nearly 1,000 copies have been disposed of by the publisher at this date (Sept. 15, 1864.)

THE NATURAL HISTORY OF SECESSION OR DESPOTISM AND DEMOCRACY AT NECESSARY, ETERNAL EXTERMINATING WAR.

By THOMAS SHEPHERD GOODWIN, A. M. Published by JOHN BRADBURN, 49 Walker St., New York.

As we have excluded from our columns all matter not directly relating to the interest of the medical profession, some will be surprised that we refer to this work. We hav

just two reasons for doing so. We understand that the author is a homoeopathic physician and we are satisfied that the work is worthy of special commendation. This is deem sufficient.

In his introduction the author refers to the prophecy of Daniel respecting the allegorical image with golden head, silver chest, brass belly and thighs, legs of iron, feet part iron and part clay, which represented the Babylonian, Medo-Persian, Macedonian, Roman and the modern Kingdoms of Europe and Western Asia. The prophet saw "a stone cut out without hands which smote the image and broke them to pieces," which our author sees fulfilled in an impinging force of a developed form and principle, hostile to all monarchy breaking to pieces the only remaining representatives of that form of government.

The work demonstrates the incompatibility of the slaveholders secession movement with true democracy and the impossibility of righteous compromise with the rebels.

He says p. 98 : As well might one go on a mission of peace to the eternal abode of devils and damned spirits, expecting to harmonize their jarring strifes, and to produce an enduring compromise between the conflicting passions of those who there abide, as think effectually to obviate or compromise the conflict that has raged in this country for the last half century, for the most part with unbloody weapons, but which has now assumed the more natural and effective form of fierce and bloody, not to say, exterminating war. Any truce, or compromise, or compact, or division of territory, that could be agreed upon, would of necessity, be only the inauguration of interminable, vexatious, bloody and disastrous hostilities.

(p. 111.) "And the present war must last with all its world-rocking commotions and its local devastations, till one or the other of the conflicting principles, either despotism or democracy, with its final adherents, no longer survives with power to carry on the conflict."

Do you say, "and the war, let them take their slaves and go," then we ask when there are three parties to this conflict, the northern whites, the southern seceders and the blacks, are you going to be so magnanimous as to ignore the right of the colored race for the sake of peace? If so, hear our author once more and we will then ask you to send for his book and read the whole. It is just the book for the occasion.

(p. 147.) "Aside from the indelible disgrace, enfeeblement and humiliation of part-

ing with a needed portion of our national domain, to permit the establishment of a slave-holding confederacy on the borders of this republic would be about as bald a suicide as a nation of idiots could commit.

A perpetual series of alarms, which the leaders of such a confederacy would instinctively be raising, at no cost to themselves, and for mere amusement, would in a few years, worry the northern democratic government out of existence, by keeping it in a state of afflicted uncertainty, more disastrous to its delicate and varied industrial and commercial interests than actual war. No sane man can pretend that treaties with such a confederacy would avail any more than did the official oaths of the traitor Senators, Congressmen and Cabinet officers who gendered it."

Practice of Medicine.

SPINAL MENINGITIS.

Under this head are embraced Spinal Meningitis and Myelitis. The distinction between these two diseases, sought to be established by some medical writers, is without utility in allopathic practice, which treats all inflammations alike, regarding inflammation as a diseased condition of the blood manifesting itself in different localities of the system, as we see in rheumatism, scrofula and syphilis, when circumstances favor their development.

Under homoeopathic treatment such a distinction would be very serviceable, if it were possible to diagnosticate, with anything like precision, the two diseases. For Homoeopathy addresses its remedies immediately to the diseased part, and could we know whether the body or investing membranes of the cord were diseased, we might be able to select remedies (at some future day, if not now,) that would bear directly upon the focus of the disease. It is so in diseases of the lungs; pleurisy yielding rapidly to Aconite and Bryonia, while inflammation of the parenchyma succumbs more frequently to Phosphorus and Tartar Emetic. But the difficulty in inflammation of the spinal cord and its membranes is, to be able to distinguish, by the symptoms in the case, whether myelitis or spinal meningitis is present; the symptoms being about the same in each case. Prof. George B. Wood, of the Pennsylvania University, says: "It has been suggested that meningeal inflammation might be recognized by the existence of tonic spasms of rigidity, but these happen also in pure myelitis, though less frequent or striking. Paralysis may generally be

considered as an evidence of the latter complaint, when attended with other marks of inflammation in the spinal column." But this information comes too late; it is little better than that brought to light by a post mortem. Who expects to cure myelitis after paralysis has set in? I confess I have no faith in it. Not only the functions of the cord have to be restored, but also its organic integrity; and who is sufficient for these things? In regard to the difficulty of distinguishing myelitis from spinal meningitis, Dr. A. W. Barclay, assistant physician to St. George's Hospital, has the following in his "Manual of Medical Diagnosis": "I have said nothing of the means of distinguishing spinal arachnitis from inflammation of the substance of the cord, nor again of the difference in symptoms between inflammatory softening and hardening; they are far too uncertain to be laid down for the guidance of the student, who may rest quite satisfied if he can distinguish inflammation either of acute or chronic form from other lesions."

In severe, acute attacks of inflammation of the spinal cord, the diagnosis is not very difficult. But when it is of a milder character, a careless practitioner may mistake it for rheumatism or neuralgia. The disease "is always characterized by pain somewhere in the region of the spine, and generally pretty high up; of a fixed character, and notably increased by any quick change of posture. In well-marked cases this pain is accompanied by spasm, having somewhat of a tetanic character, especially in the muscles of the neck and upper part of the back. Paralysis sometimes comes on early." When paralysis sets in, we may know that the nerve fibre has undergone a change, and that the disease is not limited to the membranes. Paralysis is the main symptom that points to *chronic* disease of the cord: though this alone cannot reveal to us the exact nature of the disease with which the cord is suffering. If the paralysis be caused by inflammation, there will be first pain with spasm, then a numbness indicating the approaching paralysis. But if it be caused by a tumor pressing on some portion of the cord, the pain in the back, heat, cold, tingling and formication come on simultaneously. According to Barclay, another circumstance that may assist us some in arriving at the cause of a paralysis, is, that in atrophy of the cord there is no pain, and the atrophy is confined to the lower end of the cord. Tumors are found more commonly towards its upper extremity, while inflammation is apt to diffuse itself widely. One *characteristic* symptom of spinal inflammation, of whatever kind, is a feeling of constriction around the body, either in the chest or abdomen, according to the precise seat of the inflam-

mation. Another characteristic is spasmodic rigidity of the muscles, especially of those lying along the spine. Wood says, "the symptoms occasionally remit considerably, as in cerebral meningitis, and are said even to intermit, but afterwards to return with increased violence." That the symptoms do remit, and even intermit occasionally, corresponds to my experience. The most distressing case of spinal inflammation I ever saw had this character. The patient was an infant of eight months, of a loose, flabby texture of body, its parents of largely developed, lymphatic temperament. (They had lost one child with this disease, it having been attacked when about of the same age as this one.) The attack was ushered in with fever, a greenish, slimy diarrhoea, and cerebral symptoms, and great restlessness, as if in great pain. Soon the little patient commenced burying its head in the pillow, owing to contraction of the posterior cervical muscles. The muscles of the back and extremities soon became involved in one intense tonic spasm. The brain was evidently implicated, as indicated by the strabismus and peculiar furious expression of the countenance. The violent contraction of the muscles extorted constant screams from the little sufferer. After about six, eight or twelve hours of intense agony, it would fall asleep, and there would be a relaxation of the spasm, which, however, was renewed with all its previous violence immediately on walking. Sometimes there were resting spells in its waking hours. The spasmodic drawing appearing disposed to become aggravated every six or twelve hours.

These violent drawing spells continued to return for many days. *Mercurius Sol.* soon controlled the diarrhoea, and *Belladonna* relieved the cerebral symptoms. The strabismus departed, and the natural expression again came to the countenance, but only to increase the agony of the patient, who was now fully alive to every impression that was made upon its nervous system. Every remedy recommended by Homœopaths was tried in vain. Still the patient was drawn all over; arms, fingers, back, feet and legs, were irregularly contracted. The extensors of one foot and hand, and the flexors of the other, were permanently rigid, and in like manner those of the arms and legs. Deglutition was almost impossible. The regular exacerbations of drawing of the muscles continued, which added greatly to the patient's sufferings, as evidenced by its constant cries. These drawings did not consist of a sudden spasmodic action, *but a constant, steady contraction, which caused the child to writhe* with agony, and drew it into all sorts of shapes. I despaired of success in the case, as I had run through the known

remedies (as I thought) in this disease. At this juncture I determined to try a medicine which I had proved on myself, and which proving I had laid aside, never having found a case in which I thought it was homœopathically indicated. This was the *Gelsemium semper virens*, or Yellow Jessamine. The proving was only fragmentary, yet, as I am very sensitive to the effects of the plant, I thought my individual proving might be somewhat relied on. The following is a copy of the proving above referred to:

Proving of the Gelsemium Sempervirens.

Gelsemium 6th, one drop to a half tumbler of water; a teaspoonful every two or three hours.

A dull, full feeling (attended with some aching) in the whole of the orbits.

A feeling as if something remained behind in urinating; the stream stops and commences again.

A dull, full aching, extending from the ensiform cartilage along under the free ends of the right short ribs to the lumbar region, as if the liver were congested. The worst pain is about a hand's breadth from the lower end of the sternum.

Continual jerking in the right sartorius muscle, about the middle of the thigh.

A slight, sharp, crampy pain in the left gastrocnemius, about the largest part of the muscle. Drowsiness in the forenoon.

Cramp in the instep of the right foot.

Cramp in the right side, in the region of the last short ribs.

The piles return, with raw, smarting pain.

Dull, slight headache all over the front and top of the head, after sleep in the forenoon; also after sleep in the evening. Light head.

Slight dryness of the mouth and throat, with disposition to swallow frequently; the dryness is like that produced by eating salt bacon, but no bacon has been eaten to-day.

Feeling of relaxation of the whole body, especially of the hands and feet, with indisposition to move.

Breathing slow and superficial, with now and then a deep inhalation. Pulse slow and weak.

Cough hacking, with feeling as if a drop of liquid had entered the windpipe, with frequent clearing of the throat. In eating, the food drops into the trachea causing strangling.

Sharp stitch through the left eye-ball, from within outwards.

Sharp stitches of pain, as of drawing or cramping of single fasciculi of muscle, about the origin of the *gluteus maximus*, on the left side; the stitches run in the direction of the hip joint.

Drawing pain in the left hamstring, ex-

tending across the joint to the origin of the *gastrocnemius*.

Drawing stitches in the dorsum of the right hand, running down into the middle and ring fingers.

Pain in the stomach, extending from the pyloric end of it to the axilla, and under the scapula, and down the right arm to the external side of the forearm, which terminates about a hand's breadth from the elbow. This passed off after taking biscuit and coffee.

Sore feeling, during deglutition, about the root of the tongue and larynx, with an accumulation of mucus in the upper part of the trachea, causing frequent clearing of the throat.

Slight griping pains through the abdomen, most in the umbilical region, after supper.

One of the right inguinal glands became swollen and tender to the touch.

Two little painful spots on each side of the umbilicus, extending down into the bowels; the pain is increased by pressure. (*End of the second day of proving.*)

Continued proving 6th dil.—two drops in half tumbler of water, two teaspoonfuls at a dose:

Slight jerking about the middle of the rectus muscle of the right thigh,

Slight jerking, in the *vastus externus* muscle of the right thigh, near the knee.

Burning sensation around the inner canthus of the right eye.

Full feeling in the whole head, with some throbbing and uneasiness in the occiput; the head feels full and excited, or feverish.

Sharp stitch around the umbilicus; weak, nauseated feeling in the bowels.

Mucus accumulates in the nose and upper part of the trachea. The mucus slips into the trachea while talking, which keeps up a hacking cough.

Languid feeling of the whole body, especially of the hands and feet.—*Western Hom. Observer.*

[To be continued.]

DYSENTERY—PHOSPHORIC ACID AND MERCURIUS.

BY C. E. MORSE, M. D.

I feel perfectly justified in recommending to your notice from an experience of years, Phos. acid and Merc., in alternation for bowel complaints and the most serious cases of dysentery. I consider them almost specific, and in particular when the evacuations are bloody mucus with a sweetish or fresh odor, and very soon the two properties separate and become putrid. I have found no other remedy which meets that peculiar symptom as well as Phos.

acid, and the flatulency and distention of the abdomen is quickly relieved. I give Mere. 3d trit., Phos. acid 1st dil.

EUPATORIUM AROMATICUM.

Dr. F. C. Hunter reports "I have used the Eup. aromat. with excellent effect in *Stomatitis Materna*, after failure with other remedies."

Societies.

CAYUGA COUNTY HOMŒOPATHIC MEDICAL SOCIETY.—The Homœopathic Medical Society of the County of Cayuga, N. Y., held its quarterly meeting at the office of Drs. Robinson & Boyce, in the city of Auburn, Sept. 13th, 1864. Present, Drs. Robinson, Robinson Jr., Fellows, Gwynn, Peterson and Boyce. The minutes of the last meeting were read and approved. The printing Committee reported that they had money to pay for By-Laws and reports, but as the prospect is that paper will soon be cheaper, they thought best to report progress and ask for further time, which was granted.

Dr. Robinson, from the Committee on Theory and Practice, gave a synopsis of a paper on Dysentery, which he had been unable to complete in time for this meeting.

Dr. Robinson, Jr., reported on special Therapeutics.

Dr. Fellows, from the Committee on Materia Medica read a paper on that branch and gave a proving of *Phytolacca Decandria*, which he had made, showing its effects upon the system and particularly on the throat. Also a proving of *Lachesis*.

A valuable proving of Phosphorus by Dr. E. R. Heath, of Palmyra, was read. The symptoms were of decided Dysentery, with typhoid complications. On motion, Dr. Heath was requested to send a copy to the Review for publication.

Dr. Boyce, from the Committee on obstetrics reported on the subject of induced abortion, giving statistics showing its terrible effects upon the system both physically and morally.

Dr. Peterson, from the Committee on Voluntary Communications, reported a case of Rheumatic Ophthalmia, cured by *Veratrum Viride* and *Macrotin*.

Dr. Robinson detailed a case of collapse following Cholera Morbus, where none of the ordinary remedies did any good, which was promptly cured by the Tincture of Aconite.

Dr. Peterson read a paper on the treatment of catarrh.

A paper from Dr. H. M. Smith, of New York, on alternation of remedies was read, and on motion he was requested to allow it to be published.

Two papers from Dr. Lodge, of Detroit, were read, and on motion, he was requested to publish them in the Observer.

A letter from Dr. Colby, of Concord N. H., was read, giving his experience in the use of cold water in curing disease and affirming his unbounded confidence in its use. The society expressed its thanks for the information and sympathy for Dr. Colby, who has worn himself out in the arduous labors of his profession.

Adjourned to 2d Tuesday in December, 1864.
C. W. Boyce, Sec'y.

The Fourth Annual Meeting of the Otsego Co. Homœopathic Medical Society was held in Cooperstown at the Empire House on Wednesday June 8th. The meeting was called to order by the President, Dr. J. H. Foote.

There was a general attendance; the committees submitted their reports which were duly acknowledged and placed on record. Some very interesting cases were reported by Drs. Warren, White, Matteson, Getman, and Blodgett. A very interesting communication was read by Dr. Foote on the peculiar effect of Diphtheria upon the human system, also a valuable paper by C. Bruchhausen upon *Pemphigus chronicus*.

The following officers for the ensuing year were elected:

President, Dr. J. H. Foote; Vice President, E. B. Warren; Secretary and Treasurer, S. C. Warren; Censors, Drs. E. B. Warren, M. Matteson, N. Getman; Delegates to State Medical Society, M. Matteson, N. Getmore. Dr. J. H. Foote was appointed to deliver the next annual address.

S. C. WARREN, Sec.

Miscellany.

ON THE INFLUENCE OF CULTIVATION UPON MEDICINAL PLANTS.

[From Repertoire de Chimie, in London Pharm. Journal.]

Some correspondents have recently expressed to us their belief, that extracts made from herbs growing wild keep better than those prepared from the same plants in a cultivated condition. As this is a point of great interest, and one which has an important bearing upon the preparation of medicinal extracts, we subjoin the following translation from '*L'Union Pharmaceutique*,'

of a report recently presented to the Imperial Society of Medicine of Toulouse, *On the influence of cultivation upon medicinal Plants*; by M. Timbal-Lagrave.

"At the present time, it is scarcely necessary to insist upon the advantages to be derived from a knowledge of botany, and the important applications of such knowledge in the treatment of disease. Whilst we thus admit the importance of an acquaintance with the medicinal properties of plants, we must acknowledge, however, that it is not so easy to ascertain with certainty under what conditions medicinal plants should be chosen and collected. Although many authors have written treatises on Therapeutics and Pharmacology, we are far from knowing, as yet, the principles which ought to be acted upon in the choice and collection of medicinal plants. The great number of writers recommend that such plants should be collected in those places where they grow wild, under the belief that if they are removed from their natural habitats, they will but rarely find in their new ones those conditions which are necessary for their complete development, and that, hence, they will languish, become sickly, and will not possess in the same degree the properties which they had in their natural states, and the medical practitioner would therefore have to deal with doubtful and variable agents, in which he could place no confidence.

"It must not be imagined that this decision in favor of wild plants has been arrived at hastily, or without proofs; on the contrary it rests on certain scientific data, which the labors of modern physiologists have confirmed. Thus, if we cast an attentive glance upon the distribution of plants over the surface of the globe, we shall be struck at once with their number and variety, and if we search for the causes of such variety, and for the evident preference of certain plants for particular localities, we shall see that they obey those influences in which heat and light have the greatest share; it is in fact by them that the seasons affect the climates, which have, in their turn, so powerful an action upon vegetation. It is heat and light which increase or diminish the respiration, circulation, absorption, and exhalation of plants, in fact, it is to their influence that vegetable secretions owe their peculiar tastes and odors. A plant, says M. Alph. De Candolle, is a living machine working under the influence of two external agents, heat and light, and one internal, life. He observes, at the same time, that the old botanists ascribed to these two agents a still greater influence, for they looked upon plants as thermometers, the degrees of which

were marked by the phenomena of vegetation.

"It is also by heat and light that we explain the preference of some plants for certain latitudes, certain climacteric zones which they do not go beyond. It is also by them that we account for the presence of a great number of species at particular heights above the level of the sea, from whence they neither ascend nor descend without destroying themselves or their progeny. It is also to these two agents that we must attribute the fructification of certain species in a given spot, a fructification which cannot be produced if such plants be placed in colder regions; such are, for example, the olive, jujube, etc.

"To these and other causes of a purely physical character, we might add those of a chemical nature, for although these have been altogether denied by some writers, they have, nevertheless, a great influence upon the distribution of plants over the earth. All botanists, for instance, know the preference of certain species of plants for silica, chalk, etc.; of others, for mixed rocks and gravel, etc. Those species, again, which inhabit swampy or turfy ground, those which select stagnant and warm waters, or those which choose running and cold streams; and those which spring up in the woods, meadows, or upon walls, ruins, etc., are not placed in such situations by chance and without appreciable causes. Again, without referring to parasitic plants, examples of a more extraordinary predilection have been noticed,—such, for instance, as are presented to us by alternating plants—namely, those which appear in certain soils for one or two years, then disappear to return again and again disappear; thus obeying some particular physical and chemical influences which are necessary for their development.

"The study of the physical and chemical causes which are concerned in the distribution of plants over the earth constitute the science of Botanical Geography. It is upon the data furnished by this science and upon some very conclusive physiological experiments that the selection of medicinal plants should be based if we desire to obtain efficient remedies: such, at least, is the design of pharmacologists when they advise the employment of wild plants, for they think that when they are obtained growing under other conditions, that is, when in a state of cultivation, they have lost a great portion of their medicinal properties.

"It is unnecessary for us to refer here to the various modifications which the use of simples in medicine have undergone, or to the value of the more or less whimsical notions which led to the mixture of many obscure remedies with those of undoubted

medicinal value. It is sufficient for us, at the present time, to show that a great number of plants do possess valuable medicinal properties, which render their use of great importance in the treatment of many diseases, and that, from their frequent and daily employment, a great increase in the commercial value of several of them has resulted. Hence has arisen the idea of submitting such plants to cultivation in the same way as is done on a large scale with those species which are employed for food or forage. Such attempts were at first made on a small scale, but in a short time horticultural establishments arose on all sides in which were cultivated all our indigenous plants employed in medicine, from the digitalis, belladonna, aconite, etc., to the mullein and common red poppy. These productions more developed, more fattened, if I may so speak, by cultivation, sell, on account of their better appearance, etc., at much higher prices than the same obtained in a natural state.

"In these establishments all the plants are grown together without any previous investigation as to whether the soil be favorable or otherwise; whether the situation will injure the development of their active principles, or whether the height of the position which these plants prefer will not result in modifying their properties; nothing of all these matters is considered. Those persons who make such speculations are most frequently strangers to the pharmaceutical profession, do not suspect the importance of these questions, nor the great injury they cause, thereby to the public health; they sell their productions as gardeners sell their vegetables; the profit they obtain largely repays them for their labors; they have attained their object; they care for little beyond, they are not responsible for the injury produced. Nor is this all, for, to increase the profit as much as possible, they subject some other plants, such as peppermint, balm, belladonna, stramonium, to the same periodical cutting, as is practised in the cultivation upon a large scale of forage plants in our fields, without considering in the least whether such treatment, which does not give the plants time for elaborating their active principles, will not considerably impair their medical properties. We have known, since the time of Daubenton, that the young shoots of aconite and hemlock may be eaten with impunity, while the full-grown and mature plant of the same species are poisonous. We know also that many labiate plants, such as mint and balm, contain most bitter and volatile principles when in flower.

"Thus, the scientific edifice upon which

is thus that the minute observations amassed during many ages of experience by learned men who have sacrificed their time and their labors to the relief of humanity, disappear.

"Taking the above facts into consideration, the Society, whose organ I am this day, has decided to put to the assembly the subject *Of the influence of cultivation upon medicinal plants*. We are especially desirous that to the data already acquired by science and well known to all, may be added chemical, pharmaceutical, and clinical experiments, in order to determine in a material and irrefragable manner the real and comparative values of wild and cultivated plants, so as to put an end to the vagueness and confusion which the practitioner meets with when he wishes to employ any medicinal plant. It is on this ground that the Society invites practitioners desirous of proving their zeal for science, to lend the support of their experience to therapeutics and pharmacology, in order to enlighten the medical world upon a state of things which tends to lead the physician astray, as well as to compromise the health of his patients."

In presenting the above abstract to our readers we must beg them to notice that we do not endorse all the statements therein made; those more particularly which have reference to the cultivators of medicinal plants in France, are most certainly not applicable to the very intelligent body of men who devote their time, abilities, and money, to the cultivation of such plants in England. Nevertheless, the paper is eminently suggestive, and the statements of its author should be carefully considered by all who take an interest in the growth of medicinal plants. The opinion entertained upon the comparative medicinal activity of wild and cultivated plants by the framers of the London Pharmacopoeia is, "that the herb which grows spontaneously in hedges and in uncultivated places, is to be preferred to that cultivated in gardens." At present, however, it must be admitted that no satisfactory evidence can be adduced of the greater activity of wild plants; indeed, Dr. Christison states, that "from experiments made some years ago at the Royal Infirmary in Edinburgh, with henbane, the inferiority of cultivated plants, if it exists at all, seems not appreciable in practice." According to Merat, however, the superior activity of wild henbane has been demonstrated in Germany. Further experiments upon the comparative activity of wild and cultivated herbs are therefore required before we can arrive at any positive conclusions upon the subject. With regard to valerian, however, we entertain no doubt as to the greater activity of the wild herb.

The following extract from *Beasley's Me-*

Journal of Botany, page 786, has also direct bearings upon the matter in question. Thus, after alluding to the effects of the varying intensity of heat, light, etc., upon the formation of the secretions of plants, Professor Bentley says—"At present, much remains to be discovered before we can be said to have anything like a satisfactory explanation of the causes which influence the formation of the secretions of plants: for it is found that the same plants when grown in different parts of Great Britain, where the climatal differences are not strikingly at variance or even at the distance of a few miles, or in some cases a few yards, frequently vary much as regards the nature and activity of their peculiar secretions. A striking illustration of this fact is mentioned by Dr. Christison, who found that some umbelliferous plants, as *Cistus creticus* (Water Hemlock), and *Eleonthe cretica* (Hemlock Water Dropwort), which are poisonous in most districts of England, were innocuous when grown near Edinburgh. The causes which lead to such differences are at present obscure, but the varying conditions of soil and moisture under which such plants are grown, have doubtless an important influence upon their secretions. In a pharmaceutical point of view, so far as the active properties of the various medicinal preparations obtained from plants are concerned, this modification in the secretions of plants such cases is of much interest, and would amply repay investigation, for it cannot be doubted but that each plant will only form its proper secretions when grown under those circumstances which are natural to it, and that consequently any change from these conditions will modify to some extent the properties of the plant. I cannot but believe that here we have an explanation, to some extent at least, of the cause of the varying strength of medicinal preparations obtained from plants grown in different parts of this country, or in different soils, etc."

If future experiments should demonstrate in a conclusive manner that wild plants are more active than those under cultivation, it will be necessary to ascertain what are the conditions of heat, light exposure, soil moisture, etc., which are most favorable to the full development of the medicinal properties of each plant, in order that the cultivator may place them, as far as he is able, under such conditions. Many of our medicinal plants are now employed so extensively that they could not be obtained in any proportion to the demand for them from wild localities, and hence cultivation must be resorted to to keep up the necessary supply. In conclusion, we would urge upon our cultivators of medicinal plants to study to place the plants they cultivate in, as nearly as can

be ascertained at present, their natural condition, and then we have no fear that their medicinal properties will be sensibly diminished; indeed, we see little reason to doubt that as our knowledge of vegetable physiology and chemistry increases, when the conditions under which the different secretions of each particular plant have been thoroughly investigated,—we may increase rather than diminish their active properties by proper cultivation.—*London Journal*.

PROPOSAL TO PUBLISH A STANDARD WORK ON MATERIA MEDICA.

BY CONSTANTINE HERRING, M. D.

The original observations on which our materia medica is based, the results of provings as well as the results of practice, are scattered about in our literature. Since Hahnemann gave us his "*Arzneimittellehre*" in six volumes, and its continuation in the four volumes of his "*Chronic Diseases*," no larger work has appeared; and after Hahnemann's death no new edition of any of his works was published.

In the meantime Homoeopathy has had a great number of journals, besides hundreds of smaller and larger works; has spread from Germany to France and Italy, to England and Spain, and has particularly been adopted by thousands in America. Provings have been made, and re-provings (*nachprovingen*); but all these valuable observations are scattered about in journals and books. The difficulty which homoeopathic practitioners experienced in getting "posted up," increased from year to year until it became an impossibility.

Extracts took the place of the original and complete reports of provings; the period of Jahr, Noak and Trinks, Posner and the period of repertories set in.

The intention of all such books was to enable physicians to find, for each case before them, the nearest corresponding medicine, as the one which would most likely cure. They not only collected what was scattered and inaccessible except to the few; they also shortened and condensed. They aimed to make it easier, but in this the same mistake was made that physicians make in ordering the extract of a pound of flesh, supposing that, if swallowed, it would give the same nourishment as the same pound of flesh properly prepared, cut, chewed and gradually digested by the stomach. It never will do such a thing, and never has done it. Besides that, the experience of the last twenty-five years has more than sufficiently proved, not only how incomplete and inefficient all such books are, but also, how injurious to our art. The period may have been

a necessary one, an intermediate transition state of our art, but it has decidedly not favored mastership in the materia medica of our school.

All such books were shorter, and of course ought to have saved time; but, on the contrary, it took more time to find in them what we wanted. A large dictionary, well arranged, saves time, while with a condensed smaller one lose time by fruitless search.

All such books seemed also cheaper, but still our literature became more and more expensive through them; when editors and publishers made arrangements to save a few dollars in the printing of them—for instance by letting the symptoms run on in the same line, or by a horrible number of abbreviations—our eyes and our minds were tortured by using such books, and we not only lost time, but even our willingness to look over the mass, and to compare and become familiar with what is the most important in our art, *i. e.*, with the minutæ.

Whereas our eyes could glide over the large number of symptoms, if singly printed, with the same ease with which a bird, soaring in the air, views the field and its furrows, we *now* stumble along and totter about, more like turtles ashore or terrapins on ploughed ground; and when once we fall on our back it is hard work to get upon our feet again.

But the worst of all is the dependence in which we are placed. We depend upon the views and notions of the individual who prepared the extract. We are, in this respect, like birds caged in and hung up against the wall, to be fed with whatever our master pleases to let us have.

A Homœopathician will never learn to master the materia medica, overlooking and commanding the whole, as a general does the regiments of his army, as long as he is dependent on such extracts.

Thus it is a large work that we need, containing all that has been obtained thus far, and as complete as it can possibly be made, spaciouly printed, arranged for the eyes, facilitating the operation of the mind through them, and enabling every one to look over it quickly and with ease, and to find particulars when wanted.

Having been engaged for the last twenty-five years, by daily additions and arrangements, in the preparation of such work, we presume that the main objection—in fact the only one—to publishing it, might be the high price.

Books for everybody are cheap; books for a minority, and therefore for physicians in general, must bring a higher price; books only for a minority among the physicians, consequently, the highest. Thus no publisher could undertake a work of such extent. *The only way is to do without a publisher,*

to have it printed for subscribers, and at their expense, and in order to avoid all risk, the first edition of at least five hundred, if possible one thousand copies, to such only as prepay. This will make it one of the cheapest books of its kind. Thus, under the following

Conditions.—Every subscriber giving his full name and residence, and paying in advance not less than five dollars, receives a check, and for every additional five dollars a separate check. For such checks every agent of the work is bound to give to bearer, at any time when presented, as many sheets of the work as have been printed after the date of said check, for *cost price*, free by mail, in the form of a journal or newspaper. Said *cost price* consists of one per thousand, or in case of a smaller number of subscribers, one and a half or two per thousand of (the cost of) stereotyping the plates for each sheet, and the price of paper and printing, and the mailing of it by sheets. If binding is ordered, the original cost of the same is added. An account of expenses in full is to be given on the cover.

Every subscriber will receive as many sheets as are paid for in advance, and a notification of the period when his subscription runs out. No credit to be given, not even to the publisher himself, who must pay in advance for every copy he wants beside the proof sheets.

No free copies shall be sent to editors or publishers. The trade price afterwards is to be double the cost price, the plates and copyright becoming the property of the editor. Every subscriber is invited to send by mail, in legible letters, his views, propositions and preferences; every such letter will be duly acknowledged and answered on the cover.

Additions from trustworthy collaborators are welcome, and will be added; contributors receive a fee after the publication of the work is secured, by checks for the work, not cash.

The Plan of the Work.—The work will be published in monographs, the main medicines and those most proved each in a separate volume, and the clinical experience given separately.

The smaller, less known medicines are to be given in families and the clinical observations united with the symptoms in the same schema. When the smaller provings make it desirable, the symptoms of several families with their more or less known drugs shall be placed together in one volume. The main rule shall be to publish what is ready for the press as soon as the money for printing has been advanced. As nearly as possible the order is to be the following: a chemical drug, a plant and drug of animal

origin, alternatively, and in each kingdom to follow the natural order.

The whole work will, even in a few years, show, like the map of a newly discovered world, how far our explanations have been extended and what still remains for us to do.

The first number will contain the schema, fully elaborated, in German and English, serving as a key to the whole work and at the same time as a glossary to settle all the difficulties of translation. As the majority of provings thus far were originally written in German, and as now the majority of homœopathic physicians speak the English tongue, it has been thought best to use both languages in opposite columns, facilitating at the same time a familiarity with both languages.

The first volume will contain Sulphur, all the symptoms given by Hahnemann, by the Austrian provers and others, arranged according to the schema, like all other drugs afterwards.

As another series of monographs, which will be separately announced as soon as a sufficient number of co-laborers are secured to be able to continue the publication with an equal promptitude to that which can be promised in regard to the first series, a history of each of our proved drugs will be given, in the manner first introduced by Dr. Stapf and afterwards adopted by Dr. Franz, Dr. Seidel, Dr. Noak and particularly by the Austrian provers; a history containing the introduction of the drug into *Materia Medica*, its application according to the different opinions of the older schools and cases of poisoning, if there are such, etc. To this will be annexed all the day-books of the provers as far as they can possibly be obtained.

Such a work would be a real basis to *Materia Medica*, as a science, in the same measure as our first series will be the basis of our art as an art of healing.

Repertory.—A repertory according to the same schema has also been in preparation for several years, based upon the manuscript of the *Materia Medica*, and shall be printed in parts according to the main divisions; the first part, containing the mental symptoms, will be arranged by Dr. Raue as the most efficient collaborer in this psychological part, and shall be printed as soon as finished. It will be considered as belonging to the *Materia Medica* and will be sent to all the subscribers without further notice. Notwithstanding the high prices at this moment, the work may be delivered to the first thousand prepaying subscribers, in the large dictionary size, like Allibone's Biographical Dictionary, at an approximately (not binding) estimated cost of one sheet for ten or fifteen

cents; for five dollars prepaid the subscriber may receive at least thirty, or if the number of subscribers amount to one thousand or if paper becomes cheaper, as many as fifty sheets. Renewing the subscriptions once or twice every year, within a few years every subscriber will be in possession of the completest work on *Materia Medica* which has ever appeared, and of which the trade price may be very nearly one hundred dollars.

A homœopathic practitioner will not be considered as fitted out for his profession without this work.

HOMŒOPATHY A PROGRESSIVE SCIENCE.

BY J. M. LONG, M. D.

In writing or speaking upon the subject of Homœopathy, we enter a field so broad that we are, at first, bewildered. Including as it does the human system, the spiritual condition and the world of nature, we may say that it is universal in its application and infinite in its connections; but its most important offices lie within the sphere of each individual, therefore, it belongs to every man and especially every physician to unfold its simple principles to the understanding. Within the human organization lies all the forces of nature, and therefore the truest system of medicine is the one that includes the greatest number of laws, and operates through them. And not only does man include the forces of the natural world, but he has within him higher powers denominated the intellect, the mind, the spirit—the soul. Thus a system of medicine that takes no cognizance of man as an individual and spiritual being is really suited only for the animal kingdom.

All diseases have relation to the vital principle in man and thus hold connection with the moral, intellectual and spiritual condition. Hippocrates said "it is impossible to know the nature of diseases, if we are unacquainted with them in the indivisibility from which they emanate." There has been a dim and uncertain recognition of this truth in all the systems of medicine since his time; but his disciples and followers have never understood that disease is not material, but truly spiritual; that it, it relates to the vital principle in man. It was left to the immortal Hahnemann to discover that no mere study of disease in its relations to the purely physical man can be of great benefit. For instance, the practice of removing a tumor by cutting, is the attempt to treat disease physically. The cause of the tumor lying in the system, still has its effect on the vital powers.

A disturbance of the vital forces—or a disturbance of their equilibrium, is disease—the signs of which show themselves in symptoms. It is these symptoms that reveal to the physician, the disturbance of the hidden forces, which it is his duty to equalize and restore to perfect action. Now, all vital force connects itself with the brain, and thus all disease becomes mental as well as physical. We can readily assert that no system so perfectly recognizes this, as that of Hahnemann. It demands to know the mental condition of the subject; it recognizes him as a spiritual being and subject to laws that include a higher power than that of the merely physical nature; it is not content with trying the harmony of one string of this thousand tuned lyre, but it would make all the chords vibrate to reveal the true condition. Thus Homœopathy never contents itself with a superficial symptom, but with the sum of the physical, mental and spiritual disturbances.

All remedies have, too, symptoms, which must be individualized and totalized. These remedies have specification and general action. All that the human system absorbs acts upon the vital forces. The food goes to supply its waste; some kinds stimulate the force, some only nourish it. All remedies act upon this vital force and tend to restore its equilibrium a more greatly to derange it. Its restoration is health. All disease is then purely spiritual and not material, but if we would act on this vital force, what is the best means? Do we not know that the vital force is most susceptible to that which is nearest to it in assimilation of particles? These are sufficient proofs to show the action of alternated particles without enumerating them here. We want the speediest means of reaching the cause of disease, and that is why we must have those remedies which most speedily reach the cause. For this reason Homœopathy steps in, in advance of the old schools. But we must consider also that the human system is subject to laws of progression, and becomes more susceptible as it is more and more governed by the higher laws of its being; thus as the ages advance, Homœopathy will unfold itself more perceptibly, because the human system will be better fitted for its higher investigations,

It has been discovered that many of our most efficient remedies have been found in plants that have been supposed to have had no very powerful action on the human system. This is because those plants contained high dilutions in a natural state of some remedial agent.

Certain minerals too have been known for many years to act upon the system when worn externally. During the prevalence of

the Cholera many people wore copper bracelets with excellent preventive effect—we know copper is an excellent remedial agent in cholera, but what delicate particles must the system have taken by absorption. The fact of infinitesimal absorption has been long recognized; the miasm of certain districts has always been known; the effect of climate, the action of certain simples, all these have proved the existence of the laws of infinitesimal absorption and action. But to reduce these laws to a science should be our effort, and to do this, we must not stop at any mere assertion, but test the action of medicines in their crude and attenuated forms.

There is nothing more certain than that we need a higher recognition of our system—that is, we need to behold it as universal and ever existant, acting now by more direct and apparent laws, but ever the same—unchanging and certain. By this is not meant that there must be one beaten track, one method of treatment in all cases. No, each person is governed by the laws of his humanity and yet no two will reveal the same disturbance of vital force because no two are alike in mental condition, more than in physical form. Therefore we want no fixed method of procedure, but a recognition of the unchanging laws of nature, and through those laws the revelation of their perfect action. We want to take the highest possible ground, that science can give us, and from that ground we can reach higher, unto effects that science cannot grasp, until it weds itself to spirit.

We must study men not as mere machines with a spring here, a valve there, with cogs and wheels; he has a system, wonderfully perfect, but it is governed by mental action and not by mechanic force, thus for the adjustment of this machine, we must have a knowledge of that force. Our system is adequate to introduce the fact of this vital principle if nothing else can, but is it adequate at present to reveal its laws?

Our great teacher Hahnemann, moved by inspiration, recognized the position of man in the scale of being and found him to be a spiritual as well as a physical being. But great as his discoveries were he left the many links in the great chain of his philosophy to be outworked by his followers. That which is universal in its application it must take ages fully to unfold. The great foundation stones of our structure were laid by the inspired genius of our teacher, but he bids us through his system to build the structure upon it, that shall reveal the perfect and entire. That work belongs to each one of us, and especially to those who feel that they are successful in the treatment and cure of disease. They are too apt to

rest in the satisfaction of their own success without attempting to unfold its principles. Suppose that Hahnemann, when wearied with medicines and perceiving that the human system had higher action than was recognized by the Allopathic School, had contented himself with his own success, and never sought to hold up a system that could benefit others. His industry and unselfish labor reproach our labors. We need men that are willing to seek for the causes of things, not for their own individual aggrandisement, but for the benefit of the world and the advance of science. If we fail in much we attempt, why do we fail. Is it because our system is deficient? Let us see if it is not our ignorance of those hidden laws of man's being.

Let us urge upon ourselves more earnest adherence to those fundamental principles of Hahnemann that are now established as unchanging truths; but let us never say "enough" as long as one ill remains untouched or one suffering unappeased.

CHLOROFORM ACCIDENTS.

Dr. Chas. Kidd says, in the *London Medical Times*: "I have individually studied, with some care, over ten thousand administrations of chloroform. I have never had any sort of chloroform accident in my own practice. My views are set forward in the three last volumes of the *Transactions of the British Association*, as the medical journals, except yours, steadily refuse to state, or misrepresent, what is doing about anæsthetics. Dr. Silvester suggests the elasticity of the ribs as useful to get the chloroform out of the air in the lungs in impending or actual death from chloroform; but he forgets the chloroform is not in the air, but is in the blood of such a patient, and there is probably little or no air at all in the lungs, as the respiration will probably have ceased for five, or seven, or ten minutes, at the exact time when the 'Faradization' current is so useful in producing full inspiration and breathing. Of course, every one tries the Silvester method in such accidents. It was tried in the recent case, the subject of his remarks, but it is not sufficient. I believe, if continued for at any time, too, it pushes mechanically a large quantity of blood out of the liver and portal vessels into the cava and right auricle. The very thing we do not want, as the death is in reality in asphyxia (apnoea) cases attended by, if not directly caused by this enormous mechanical congestion of the right cavities. The 'blood stands still,' as my friend Mr. Paget once said to me, and we can only give it a fresh start through the pulmonary artery by immediate full action or dilatation

of the lungs and respiratory muscles. This, in hundreds of experiments on the lower animals, is observed to be best effected by the Faradization current (with intermittent broken circuit) through the phrenic nerve and diaphragm.

"M. Flourens has just pointed out this marked congestion of veins of the cerebral membranes as diagnostic of chloroform coma as distinguished from the coma of apoplexy. The cause, in fact, is the same—the *remora*, or back tide of blood in the veins, (partly from the mechanical efforts at resuscitation, by rubbing the limbs, etc.,) the right side of the heart engorged and not receiving the blood from the jugulars, where it stagnates. The left or systemic side of the heart, on the contrary, continuing active to the last, even after the pulse is gone. I must confess I do not like the violent Silvester pressure on the ribs of patients under chloroform; they groan as if in great agony from it; they describe it as a hideous nightmare-pressure worst than all the agonies of the operation without chloroform at all. I think I now begin to see that in hospitals and by dentists' assistants chloroform is given too often as a matter of routine, and one set of nightmare agonies are thoughtlessly substituted for the old sharp cut of the surgeon's bistoury, not half so bad without chloroform. I believe the 'Faradization' current differs from all other varieties of galvanism, as vaccination is milder and differs from small-pox and it makes chloroform now quite safe; but the Silvester method is imperfect.

"A few words will prove useful as to the latest deaths from chloroform in London. One is noted last week. A young woman, aged 29, Selina L., Edgware Road, who died in an instant, apparently of syncope, as she was about to have a small tumor of the gum (epulis?) removed. No one to blame, it being one of those singular and miserable cases of idiosyncrasy that can scarcely be anticipated. Dr. Lankester made some excellent remarks, as is his wont, at the inquest. Would that all our coroners were like him. A second case of death was at Guy's Hospital. A man put under chloroform for a dislocation to be reduced. He bore the anæsthetic one day very well; but the reduction was not effected, and he was desired to come again, I think, next day; but he was only half-way under chloroform when his death, as a flash of lightning, suddenly occurred. The third case was removal of a small tumor; I believe an asphyxia case. This and the fourth, somewhat doubtful, are described in the *Social Science Review*. They all bear out the chief points I have urged of the operations being usually of a slight or trivial kind, or connected with tendinous tissues about joints. I see an erroneous case (typical

cal!) in a book of Casper's, translated by the Sydenham Society. An old man, in uttermost exhaustion, pulse above 110, has his scapula cut out or removed by a tremendous surgical operation, and dies of shock and exhaustion seventeen hours after! This is not at all a death from chloroform. though it is certain to be copied as such into our manuals of toxicology. The deaths from chloroform, in a word, are all sudden; they are twice as numerous in male adults as females; they all occur in trivial operations; they are nearly unknown in children. Syncope from injury of tendinous tissues,) as long ago referred to by John Hunter), syncope from touching the urethra with sounds, latent delirium tremens, etc., are the most frequent sources of the syncope seizures which form perhaps 40 per cent. of all the cases. This at least is what thousands of operations on the lower animals and careful deductive cataloguing of 200 deaths in the human subject point to."

DIETETICAL PROPERTIES OF PHOSPHORUS.
—A voluntary communication on the Physiological and Dietetical Properties of Phosphorus was read by Dr. John H. Griscom of New York.

After a detailed exposition of the extent and amount in which this substance is found in the various tissues, fluids, secretions, and excretions of the body, there being scarcely one in which it is not a constituent, whereby importance is properly inferred—the practical application was made of the influence of a deficiency of phosphorus in a variety of diseases of the osseous, nervous, muscular, digestive, and respiratory organs. Scurvy, resulting from too free use of salted food, was shown to be probably due to the loss of the phosphates, which Liebig has proved to be removed by the salt, and is found in the brine. Fresh meat, as well as fresh vegetables, proves to be an anti-scorbutic, doubtless in both cases on account of the phosphoric acid. It was further shown that modern modes of preparing food of several kinds deprived it of this element to a large extent, to which many evil results are attributable. Especially is this the case with that "life-preserver of the world"—the wheat grain. By the bolting process, 1400 per cent. of this element is lost. Several specimens of *Farina Cocido*, or roasted wheat, as extensively used in South America, were presented to the Section, and highly commended as substitutes for superfine flour, retaining as they do all the phosphatic matter of the grain. The paper elicited many favorable remarks, and was unanimously recommended to the Association for publication in the Transactions.—*Druggist's Circular*.

ADIPOCIRE.

BY C. A. LEUTHSTROM, M. D.

Thinking that the readers of your vigilant "*Observer*" would not object to something besides the solid instruction which they receive from month to month through its valuable pages, I thought I would record a singular condition brought to mind during the removal of an old cemetery, within the limits of this city.

Upward of 900 bodies have been disinterred, and of this number twenty-five petrifications were found in various degrees of perfection, some completely solidified, except the hands and feet, which had not in a single instance become petrified.

In one case there was simply a shell of stone, of about the thickness of an inch, which in removing it was broken, thus bringing to view a perfect skeleton in its stony armor.

But the most curious fact connected with these petrifications is that not a single male were found among these beings of stone, and all during their abode on earth had been more than ordinarily fat, indeed it seems that those possessing the greatest amount of adipose tissue made the most perfect petrification. Will some one explain this singular circumstance?

Adipocire is a particular spermatic or fat-like substance, formed by the spontaneous conversion of animal matter under certain conditions. This conversion has long been well known and is said to have been mentioned in the works of Lord Bacon. On the occasion of the removal of a very great number of human bodies from the ancient burying-place des Innocens at Paris, facts of this nature were observed in the most striking manner. Fourcroy may be called the scientific discoverer of this peculiar matter, as well as the Saponaceous ammoniacal substance contained in bodies abandoned to spontaneous destruction in large masses. This Chemist read a memoir on the subject in the year 1789 to the Royal Academy of Sciences, from which a large and very interesting extract is published in Hooper's Medical Dictionary, page 27.

DEPLORABLE MORTALITY AMONG CHILDREN—NEARLY TWO THOUSAND DEATHS IN ONE MONTH IN N. Y. CITY.—In the month of August, just closed, nearly two thousand children have died in this city. According to the City Inspector's reports, the average daily death rate for four weeks of the month among the children exceeded *sixty-three*; while in the week ending August 15th the number was four hundred and sixty-eight. The death of adults in August were eleven hundred.

The heavy mortality among children is owing principally to the season, and crowded unhealthy condition of the houses in which so large a proportion of the poorer classes live, and to the filthiness of the streets. The amount of disease generated by the last-named cause is beyond all calculation; and it would not be matter of surprise if the piles of garbage in the streets and gutters, and the horrible stench which fills the air in some localities of the city, should produce a pestilence. The comparatively large number of the deaths of children ought at once to direct the attention of our authorities to the situation of affairs, the danger and the remedy.

It is a curious fact, that less than two hundred of the nineteen hundred and fifty children who died in August were of native-born parentage. There is no unusual mortality of children who live in the better part of the city—a fact which exhibits in a strong light the duty of our legislators in regard to the tenant-house system, and the culpability of the persons who are responsible for the sanitary condition of the city.—*N. Y. Evening Post*.

COLORLED TROOPS IN HOT CLIMATES.—The comparative liability of white and colored troops to diseases of a malarious origin has long since attracted the attention of the English authorities, and has doubtless greatly influenced the composition of their forces serving in malarious countries. From the annual report of the British army for 1859, it appears that in Jamaica the ratio of mortality is as follows:—White 101.9, black 8.2; Bahamas, white 159.0, black 5.6; Sierra Leone, white 410, black 2.4. These facts have an important bearing on the present policy of our Government in organizing negro regiments for service in the malarious regions of the South. Already Surgeon-General Hammond has been able to contribute an item of statistical information bearing on this point. In a recent communication to the Secretary of War he states that Medical Inspector Townshend reports, that in the Department of the Gulf white and colored troops are found serving together, and equally subjected to malarious influ-

ences. The ratio of sick, of diarrhoea, dysentery, remittent, intermittent, typhoid fevers, etc., is white 10.8 per cent., and colored 0.8 per cent. The argument in favor of the employment of colored troops at the South, if based on their comparative immunity from the diseases peculiar to that region, is conclusive.—*Am. Med. Times*.

HOMŒOPATHIC PHYSICIAN WANTED AT WEST MITCHELL, IOWA.

Dr. J. E. Brown writes: "I shall leave this place next week. My residence will be Nashua, Chichasaw Co., Iowa, to which place please send my papers. If you know of any Homœopathic Physician that is a steady, temperance man and married, that would like a first-rate place have him address me at Nashua, and I will give him a description of this place and what he can do here. The practice is worth from twelve to sixteen hundred dollars a year. If you do not know any one personally, I wish you would mention it in the *Observer*, telling them to address me. It is a first-rate place. The reason of my leaving is, I am not able to stand the ride, it being too much for me. After a good physician has been here a year he will need two or three horses, and if he attends to all the calls, a good constitution, also

[Physicians can be directed to other desirable locations by addressing the editor of this journal.]

"THE GERMAN HOMŒOPATHIC PHYSICIANS OF AMERICA."

We have read with regret, in some of our cotemporaries, a call from the German Homœopathic Physicians for a meeting, to be held in Chicago in November, 1864; and were still more surprised to learn that the first steps toward the formation of this Society had emanated from the Western Institute of Homœopathy. We are most *decidedly averse* to any such organization of our German friends. We are not strong enough, nor is the Western Institute old enough as yet, to allow two Societies in the West instead of one. If the German physicians belong both to the Western Institute, the Illinois State Society, and the contemplated organization, it is very evident that their attendance will be expected at that one where their nationality is represented, and consequently the other bodies will be minus certain members. No physician in full tide of practice can leave his business more than once a year to attend Medical Societies. Those who are present at a meeting in November will not be present in May, and *vice versa*.

But the worst feature in the whole matter is the *division* that will necessarily take place among the Homoeopathic physicians. This condition of things—viz., German and American cliques—we have already had reason to deplore, and the very idea that was uppermost in the minds of those who assisted in the foundation of the Western Institute of Homoeopathy was the union of all Homoeopathic practitioners in this section of country. "In union there is strength." "United, we stand!" are proverbs the truth of which must be fully impressed upon the mind of every one during the deplorable civil war in which our country is now engaged. Let, then, all our physicians unite in one great effort; let us make one great Society in the West where the physicians of all countries, each one, shall contribute his mite toward the further development of that law which we acknowledge to be our beacon in the arduous and difficult by-ways of thesapeutics.—*Western Hom. Observer.*

EFFECTS OF SUGAR ON TEETH.—"The action of sugar upon the teeth is an undecided question. Popular belief is to the effect that the use of much sugar, and particularly of candies and sweetmeats is a common cause of dental caries. Drs. Paolo, Mantegazza, and Labus, of the University of Pavia, have recently undertaken a series of experiments to settle the matter. A translation of their paper may be found in the February number of the *British Journal of Dental Science*. The chief conclusions to which the investigators have come are—1st, that sugar (as sugar) does not exercise any chemical action upon the teeth, and that it does not predispose to caries; 2dly, that sugar only affects the teeth when it has undergone the acetic or lactic fermentation."—*Lancet.*

THE ACORUS CALAMUS AS A PREVENTIVE OF INSECT DEPREDATIONS.—Dr. Schultes observes that much use was made by the older naturalist travellers in the East of the powder of the root of *Acorus Calamus* as a preservative against insects, and that he has found it of the highest utility for the protection of herbaria against the ravages of the *Anobium pennicium*. Some of the powder is to be occasionally strewed over the plants, and this insect, beetles, etc., at once desert the spot wherever its smell is perceptible. For the same reason it is a valuable means of preserving zoological collections from insect depredations.—*Buchner's Repertorium*, 1863, No. 8, and *Medical Times*.

Personal.

H. C. ALLEN, M. D.—We are always happy to hear of the prosperity of our friends, and it gives us great pleasure to be able to notice the name of this gentleman as a member of the Faculty of the Cleveland Homoeopathic College, as Professor of Anatomy. He graduated at that Institution in the spring of 1860, and we think, where the qualifications are sufficient, that there is a particular propriety in a College selecting its Professors from its own Alumni.

Prof. Allen is a native of Canada where he was educated at the London High School. He commenced his medical studies with Dr. Logan now of Ottawa the capitol of Canada. After attending the lectures of the Western Homoeopathic College he entered into partnership with Prof. Wilson, of Cleveland. The co-partnership was dissolved and Dr. Allen entered the United States Army, but on account of his Homoeopathic principles he was compelled to leave. Returning to Canada he passed a creditable examination before the Canadian Homoeopathic Board and receives his license in July 1862. Since that time he has been in the full tide of a successful practice in Brantford, C. W., where he is greatly esteemed.

While a student he was considered the best Anatomist of his class, since that time he has had some experience as a lecturer and we doubt not his genial disposition and gentlemanly bearing will make him quite popular with the students as well as with his colleagues. Success attend his labors.

DR. F. M. REASNER.—A short time since some serious charges were made against Dr. F. M. Reasner, of Jackson, relative to his conduct while acting as a volunteer surgeon in the Army of the Potomac. The following from Gov. Blair completely exonerates Dr. R. from the alleged charges:

"Having examined the charges of misconduct made against Dr. F. M. Reasner, of Jackson, connected with the performance of his duties as a Volunteer Surgeon in the Army of the Potomac, from this State. I am satisfied that they are entirely groundless, and that no blame can properly attach to him in that matter.

AUSTIN BLAIR."

TO CORRESPONDENTS.—Manuscript, if wrapped with open sides or ends, is subject to only two cents postage on each four ounces.

Homœopathic Observer.

VOL. I.]

DETROIT, NOVEMBER, 1864.

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last sixteen years. Many of them have no reached an age or dress beyond their swaddling clothes. I sincerely hope your vigorous little sheet may weather many storms."

With the great increase in the cost of paper and other printing matters, there has followed a numerous suspension of newspapers and journals. The *American Medical Times*, not receiving adequate support, has been discontinued. If the allopathic profession cannot sustain their magazines, how can the homœopaths theirs? We shall only reply for ourselves: *The continuance of the American Homœopathic Observer can be depended upon, and we expect to make satisfactory arrangements for its punctual appearance next year.* We are, however, very anxious to extend its circulation, and propose doing so in the following manner. The price per single copy for 1865 will be \$1 50, but we will send ten copies to as many different directions for \$10, or four copies for \$5. If our friends will come forward with subscriptions, we can double our present circulation, and, without loss, give them for the coming year a readable and useful journal.

We have frequently received letters similar to the following: "I enclose \$1 for my subscription to the *Observer*, which I like very much indeed. Send one to Dr. —." To such we would say, hereafter, instead of sending only \$1, send also the subscription for your friend, and if you wish the *Observer* to prosper, aid it to the extent of your ability. Donations are not asked for, but *cash-paying subscribers.*

There are several who have not yet paid for the *Observer* for 1864. We do not like to take their names off the list, and hope that they will remit before the reception of another number.

We hope to hear frequently from our old correspondents, and shall welcome new ones very warmly.

We are under obligations to many subscribers to New Provings, for the prompt remittance of the extra 50 cents charged for book, and 24cts. prepaid for them in postage

Editorial Notice.

TO OUR FRIENDS.

A physician writes: "I thank you for the *Observer*. I think it is rightly named. It promises much, and I hope we may realize our expectations. I hope it may have a permanent growth, until it shall reach a monthly of 100 pages, or more. I believe I have taken every homœopathic journal started in the United States for the

Book Notices.

A TREATISE ON GONORRHOEA AND SYPHILIS. By SILAS DURKEE, M. D. Second edition, revised and enlarged, with eight colored lithographic illustrations. Lindsay & Blakiston, publishers. For sale at Detroit Homoeopathic Pharmacy, \$5.

Homoeopathic physicians will discard the treatment recommended in this work, yet, in the absence of any better descriptive works than those of Gollmann and Yeldham, they will find much in Dr. Durkee's book that will repay attentive study.

We are very much gratified indeed at finding a condemnation of the disgusting practice of *syphilization*.

— p. 204. "I opine that the day is far distant when the medical faculty of this or any other enlightened portion of the globe will credit the idea that the waning health of a human being can be restored or benefited by artificial syphilization, as intimated by the Norwegian professor. Certain it is that no human providence can calculate or guard against the physical mischiefs that might accrue to individuals subjected to this hypothetical and insane line of treatment. Instances of the most terrible disasters resulting from it, have been already reported. Mr. Laurence, of London, states, that one of the most troublesome cases of phagedenic ulceration of the thighs, which ever came under his notice, was in consequence of artificial inoculation, performed by a physician. Other instances are recorded in which the chancrous sores, manufactured by reckless hands, have refused for a long time to heal, or amend under any remedial measures. It may be that the experience of Turenne and others will inspire hope and courage among libertines and their meretricious companions who hail from the dens of Paris, and some of the other continental cities, and who may be induced to submit to such a style of tattooing and mutilation; but it is scarcely to be supposed that the medical faculty of this country will ever countenance such a beastly mode of treatment,—certainly not, until investigations and experiments shall ripen into higher completeness, and the sanative power of the measure has had time to exert a more persistent influence than has yet been displayed in patients, who have resorted to prophylactic syphilization. Without entering into any discussion of the real truth or fallacy of the doctrines broached

by the advocates of artificial inoculation, it is enough to say that the demoralizing associations and consequences connected with the practice, are sufficient to consign it to unqualified condemnation. The most revolting feature appertaining to syphilization and the one calculated to provoke unmitigated indignation, consists in the bold, barefaced suggestion that it may be employed as a means of safety for persons who are yet untainted, and who can subject themselves to this factitious disease, and ever after be shielded from infection, however deeply they may plunge into the foul cess-pool of licentiousness and corruption. The next step in the march of improvement, peradventure, will consist in the internal administration of pure venereal pus, or perhaps the mollified crusts of rupia, made into a paste or bolus. This would be a fitting climax."

ON RHEUMATISM, RHEUMATIC GOUT and Sciatica, their pathology, symptoms and treatment. By Hy. Wm. Fuller, M. D., Cantab; Fellow of the Royal College of Physicians of London. From the last London edition. Philadelphia. Lindsay & Blakiston, 1864. For sale at Detroit Homoeopathic Pharmacy. \$3.

The demand for a third edition of his work stimulated the author to a very careful revision. Satisfied that the disease was deserving of attentive study, Dr. Fuller devoted many years to its investigation, and presents us in the present work, in a very readable form, the results of his labor.

PRACTICAL HOMŒOPATHY FOR THE PEOPLE. Adapted to the comprehension of the non-professional and for reference by young practitioners including a number of reliable new remedies and improvements in the treatment of numerous diseases not in general use, by J. S. Douglas. A. M., M. D. Published at Detroit Homoeopathic Pharmacy. 12mo 50 cents.

The proverb has it, "A man that is his own lawyer has a fool for a client," how wise then is a person who pretends to be his own physician, or the M. D., who substitutes domestic treatises for regular practice? We suppose they are equally foolish, yet a vast amount of good is being done by books like that of what the title is above given. In almost every house there is good use for a hammer, hatchet, axe and a few other tools, yet it would be folly for every man to buy a carpenter's chest, so it is equally useful for every family to have a few remedies, and an easily understood book of directions, but foolish for laymen to attempt to understand the sphere of action of several hundred me-

diocines. The case and book is not intended to be a substitute for the physician, and in no proper sense, should it interfere with his legitimate sphere of duties; and the matron with her case does not injure his practice if she rightly uses it. She may, in some sense, be the homœopathic missionary, and help to extend the practice and pave the way for the educated medical attendant.

We have many works fulfilling this use, and perhaps none is very far superior to that of Prof. Douglass.

In this connection we must speak of another work (1), entitled:

Homœopathy for the British North American Provinces. By M. H. Utley, M. D., (?) Montreal, C. E.

With such a pretentious title, some might expect a valuable manual. At the price advertised \$2.9d. (Canada currency, equal to \$2.00 U. S.) a good book might be afforded. That the author (?) is competent to write a book at all, we do not know, but of this we are well satisfied, there has probably never been a bolder piece of literary theft or plagiarism than this pamphlet. Page after page, paragraph after paragraph it is copied from Dr. Douglas' practical homœopathy for the people and this without a word of credit, quotation mark, or reference to the book stolen from. Instead of this, there is rather an assumption of originality.

THE HOMŒOPATHIC THEORY AND PRACTICE OF MEDICINE. By E. E. MARCY, M. D., and F. W. HUNT, M. D. New York, Wm. Radde, 1864. Detroit, E. A. Lodge, 256 Jefferson ave. 2 vols. octavo, $\frac{1}{2}$ morocco, 1896 pages, \$12-

With a multitude of domestic treatises on Homœopathy, there has been no complete work on practice, adapted to the use of physicians. We have had no book to supply to the Homœopath the place that Wood's practice fills for the Allopath. This can be said no longer. The work before us will therefore be more warmly welcomed by the profession than any other book which has been presented to them for the last ten years. Of the qualifications of the authors, Drs Marcy and Hunt, it is needless to speak, their ability is acknowledged. As to the execution of the present work we must say that it is worthy of all praise. It would be much to have simply the views of the authors on the treatment of the various diseases, &c., but here we have more than this, a collation from homœopathic and general medical literature of practical value to every physician.

The authors say, preface p. 6:—"Our object throughout has been to present to the

medical profession and the friends of homœopathy, a comprehensive and intelligible view of the principles and practice of our school, as it is now represented by our best writers and practitioners; to embody, as far as our wide range of subjects permitted, the latest opinions and theories of investigators of every school on pathology and collateral sciences, connected with medicine; and to give to all inquirers after advanced scientific truth the opportunity to investigate our principles, and to see them tested by facts, as illustrated in the clinical experience of a large number of reliable observers. From all accumulated materials we have aimed to sift the true from the false, and to condense within as small a compass as possible, all reliable facts bearing upon the subjects discussed."

A TREATISE ON DIPHTHERIA, its Nature, Pathology and Homœopathic Treatment, by Wm. Todd HELMUTH, M. D., Professor of Surgical Anatomy in the Homœopathic Medical College of Mo. Second ed. St. Louis, H. C. G. Luyties. For sale at Detroit Homœopathic Pharmacy. \$1.25.

This is not a mere reprint of the old edition, the chapter on treatment has been rewritten and the new remedies, recommended since the first edition, added and due credit given to the physicians who have introduced them. This is highly commendable. When a physician finds that an author refers to a medicine which he has tested successfully, and that his name is given, and also the page of journal for which the article was extracted, he has a feeling of satisfaction about it. Call it professional pride or what else you please, it is commendable. It is useful. It stimulates to further trials, and he is more ready with communications thereafter.

With the improvements of the present edition this work will be found indispensable to every homœopathic physician.

Next month we hope to print some extracts from Prof. Helmuth's work.

BRITISH HOMŒOPATHIC REVIEW. By Dr. RYAN.

We receive this valuable and interesting Journal regularly by the 20th of each month, and being anxious to extend its circulation, offer to furnish it at the same price it sells for in England, notwithstanding the gold premium.

We will send the Observer and British Homœopathic Review for this year at \$4.

THE ECLECTIC PRACTICE OF MEDICINE. By JOHN M. SCUDDER, M. D., Professor of the Theory and Practice of Medicine in the Eclectic Medical Institute of Cincinnati, &c. Cincinnati: Moore Wilstach Key & Co., 1864. For sale at Detroit Homoeopathic Pharmacy, \$6.

In the Eclectic Medical Journal for 1864, edited by the talented author of above work, we learn (page 468) that the Eclectic practitioners now exceed five thousand; however high this estimate may be, we are satisfied that the graduates from their colleges are working in every state, constantly "harrassing the rear" of Old Physic, and we certainly rejoice at their success. Rational eclecticism is in advance of allopathy; doubtless more successful, therefore more beneficial to society in curing disease and saving life. They are doing for us a pioneer-work—preparing the way for the still better practice of homoeopathy. Those who turn away from the books of Dr. Beach, crowded with matter stolen from other works, without a quotation mark or word of credit, will find in Dr. Scudder's book much that is original, interesting and of practical importance.

THE ECLECTIC MEDICAL JOURNAL.

Edited by J. M. SCUDDER, M. D., Professor of Theory and Practice of Medicine and Pathology in the Eclectic Medical Institute, for October 1864.

Contents: Chronic Prostatitis, by J. King, M. D. The Human Foot, by A. Jackson Howe, M. D. Dietary in Disease—Sparseness of Habit. Sciatica. The Turkish Bath as a Curative Agent. New Method of operating for strangulated hernia. Effect of an Overdose of Morphia. Syrup of Chloroform. Poisoning of Digitaline. The Tomb of Secrets. An account of Government Regulations of Prostitution in Italy. Hypertrophy and prolapsus of the Tongue. Forearm wrenched off during efforts at reduction for Dislocation. Scurvy. New Researches on the Functional Nature of the Roots of the Pneumogastric Nerve and of the Spinal Nerve. Zymotic Diseases—Sulphites and Hyposulphites. Pain. Treatment of Fractures. Two Peculiar Properties of Chloroform independent of Anesthesia.

Editorial—Retrospect, Scrofula, Eclectic Medical Institute, Increase in the Price of Books, Eclectic Reunion, The Journal.

Book Notices—A Treatise on Gonorrhoea and Syphilis. New Remedies, their Pathogenetic Effects and Therapeutical Application in Homoeopathic Practice. A Treatise on Nature's Sovereign Remedies. Essays on Infant Therapeutics. The Principles and Practice of Obstetrics.

Verities—The Circulation. Delirium. Poisoning by Rhus Toxicodendron. Chlorate of Potash in Mercurial Sore Mouth. Salt as a Local Application. Anesthetics in Asthma. Quinine as a Local Application. Tetanus cured by Tobacco. Iodide of Potassium in long continued Sciatica. Staphylogria in Uterine Affections. Coffee as a Remedy in Neuralgia. Ether as a Stimulant. Pressure in Prolapsus Ani.

Contains much interesting matter of value to homoeopathic physicians.

DR. HALE'S NEW REMEDIES.—The book is at last ready, and we receive it gladly. Though it is by no means a complete materia medica of the new remedies, or even fairly entitled to the name of "Provings" of those remedies, in the full sense of the word, yet it is all that it is possible for it to be in that direction, in the present condition of our knowledge of these medicines, and will undoubtedly mark a new era in our system of practice, and make many of the profession look to the author and his aid, with grateful hearts, as having given them many new ideas and much useful information. As to the general typographical and mechanical getting up of the book we have to say we are much pleased with it, and that the publisher will find the sale profitable.—*Med. Investigator.*

Prof. Neidhard writes: Dr. Hale has laid the first stone of the great future American Homoeopathic Materia Medica, for his work contains, undoubtedly, the most extensive provings of American plants. According to my theoretical ideas, I think they will be found of greater utility in the diseases of the American climate than those hitherto in use. Having been myself engaged in similar labors, I am the last man to find fault with Dr. Hale's performances, knowing the difficulties and trials of such a pursuit, particularly for a physician in large practice."

Prof. H. C. Allen writes: "I wish to say a few words in favor of 'new provings.' Dr. Hale's new work is an invaluable addition to our Materia Medica, and should grace the library of every Homoeopathic practitioner. There are many who would object to it on account of imperfection, but all is not reliable that is to be found in our large works on symptomatology."

"I have been repaid ten-fold in the use of one remedy—viz., the Cimicifuga r., in two or three cases of Arthritis that had baffled all my best selected remedies, and in one case of Neuralgia of the heart."

Probing.

VALUE OF PROVINGS.

A physician who first noticed the articles of Dr. Burt on *Phytolacca*, remarked, with a sneer, "*Phytolacca* in *Diphtheria*, indeed!" To-day we receive from Dr. E. A. Potter a letter containing the following: "I have used *Phytolacca* in *Diphtheria*, and am highly gratified with its action." Very many others give similar testimony.

Practice of Medicine.

ALTERNATION OF REMEDIES.

BY H. M. SMITH, M. D., OF N. Y.

Read before the Cayuga County Homœopathic Medical Society, Sept. 13th, 1864.

Reports of cases treated with two or more remedies in alternation are becoming of less and less value, and ere long such treatment will not be considered as homœopathic, but will be regarded as belonging to the polypharmacy of the old school or old school eclectic, pseudo-homœopathy. In a statistical point of view, they are of no value, as we can attribute the result to no remedy as of the many we know not which was the curative. Equally valueless are they in affording any instruction for a future prescription, and particularly pernicious are they as conclusive to a routine mode of practice.

It is not my intention here, to enter into an elaborate discussion of the subject, (for this I would refer you to Dr. Dunham's article in the *American Homœopathic Review*, vol. III, p. 529), but rather to correct some misstatements which are frequently quoted by this class of practitioners.

In the majority of instances those physicians who thus practice are not sufficiently thorough in studying their cases. By more diligent search they could as well select one remedy as several. It is seldom that others than well proved remedies are alternated and with these there are characteristics which determine the use of one in preference to another.

Many who thus prescribe endeavor to justify their course by referring to the discoverer and expounders of our therapeutic law. They say Hahnemann did it. Boenninghausen recommends it in croup, and Hering advocates alternation in his domestic work. The *Organon* may be considered good authority for Hahnemann's views, and to it I refer. Nowhere in it is there any thing that we can construe into sanctioning the prescribing in advance of two remedies in alternation, one of which shall cover some of the symptoms and the other the balance. In regard to the administration of remedies, Hahnemann says:

Section 167. "In short, if the application of an imperfect homœopathic remedy used, in the first instance, causes any accessory symptoms of some importance, the action of the first dose is not allowed to exhaust itself in acute diseases; the altered state of the patient is then to be examined, and the remainder of the primitive symptoms to be joined to those which have been recently discovered, to form of the whole a new image of the disease."

Section 168. "A remedy that is analogous may then be easily found among the medicines that are known, a single application of which will suffice, if not to destroy the disease entirely, at least to facilitate the cure in a great degree. If this new remedy is not sufficient to restore the health completely, then examine what yet remains of the diseased state, and select the homœopathic remedy that is most suitable to the new image that results from it. In this manner the physician must continue until he attains his object—that is to say, until he has fully restored the health of the patient."

Section 169. "It may easily occur, on examining a disease for the first time, and also on selecting for the first time the remedy that is to combat it, that the totality of the symptoms of the disease is found not to be sufficiently covered by the morbid symptoms of a single medicine, and that two remedies dispute the preference as to the eligibility in the present instance, the one being homœopathic to one part of the disease, and

the other still more so to another. It is, then, by no means advisable, after using the preferable of the two remedies, to take the other without examination, because the medicine given as the inferior of the two, under the change of circumstances, may not be proper for the remaining symptoms; in which case, it follows that a suitable homœopathic remedy should be selected for the new set of symptoms in its stead."

Section 170. "In the present instance, as well as in every other where a change has taken place in the state of the disease, it is requisite to seek out what actually remains of the symptoms, and select as suitable a remedy as possible to the present state of the malady, without any reference whatever to that one which, in the commencement, appeared to be the second best of the remedies that were found suitable. Should it still happen, though it is not often the case, that the medicine which at first appeared as the second best, may now be very suitable to the rest of the morbid symptoms, it will then be the more worthy of confidence, and should be used in preference.

Section 171. "In non-venereal chronic diseases (consequently those which owe their origin to psora), it is often necessary in the cure to employ several remedies one after the other, each of which ought to be chosen homœopathic to the group of symptoms which still exist after the preceding one has exhausted its action; and which may have been applied in a single dose, or in several in succession."

Boenninghausen's treatment of croup is often quoted in evidence of his practice of alternating. Let us see with what truth. Boenninghausen published his treatment of croup as the *result of his experience* and observation, with a disclaimer that it was a specific in all cases of this disease. In several hundred cases which he treated, Aconite was the remedy indicated at first, and in nine cases out of ten was the only one required. If, however, any symptoms remained after its administration, they were generally those for Hepar sulph., which in some cases left symptoms which called for

Spongia (not in ten cases out of three hundred did this occur, however). In tossing about and getting uncovered, the patient is apt to have a relapse, and the case is to be treated anew. For the symptoms that would then present themselves, Hepar would be the remedy. Surely there is nothing in this akin to alternation, and whoever so construes it errs in regarding succession and alternation as synonymous. The one, consisting in the administration of a second remedy only after the effects of a previous one had been observed and exhausted, is, as is shown by the quotations from the Organon, in accordance with the homœopathic law. The other, consisting, from a single examination of the patient, in giving at short intervals two or more remedies, whose symptoms collectively are thought more fully to cover the symptoms of the disease than those of any *one* of the other remedies would, is opposed to the teachings of Hahnemann.

The next authority quoted is Dr. Hering, and his errors of omission and commission in his domestic book are arrayed against him. In the sixth and last edition of his "Homœopathic Domestic Physician, by the author himself thoroughly revised and reformed," in the introduction, page 21, he says: "Always give but one remedy, and only when this does no more good, another one." Throughout the body of the work, however, the alternation of one or more remedies is advised. Such is not Dr. Hering's practice or teaching, and those who know him will understand his explanation that *he* had missed the term. He was not aware, when spoken to, in regard to it, that the objectionable phrase was in the work and escaped his notice. The administration of remedies in succession was intended. In the instances where alternation is spoken of, the particular indication for each remedy had been given, and to assist the prescriber in his quandary as to the selection of one remedy where several are indicated, he is advised to give one, then another, and in some cases after prescribing the second remedy the previous one will again be called for.

Dr. Hering had trusted the translation or

revision of the previous editions of his work to others, and from the preface to his last edition, I quote :—"The author found his book, instead of being improved with every edition, according to his German original work, had by others, trusted with the revision, been altered in direct opposition to his own views; it had been, as he calls it, more and more spoiled, particularly by the absurd introduction, and the most miserable 'diagnosis,' and last of all by a deceptive advice in regard to the "doses," comparing the present with previous editions, I find wherever the alternation of remedies is mentioned in the one, the same phrase is in the others. It is to be hoped, that, in succeeding editions the objectionable terms will be omitted, and that Dr. Hering will not seemingly give his influence to this un-homœopathic practice.

AILANTHUS.

In the May number of the *Observer* I notice a communication from Dr. Wells on the "Ailanthus," as a remedy for scarlatina.

I have had no experience of it in this disease, but for the past seven or eight years I have employed this remedy in cases of cholera morbus, to which it seems to be specially adapted.

Several instances had come under my observation where persons had been made very ill by inhaling the odor given out by the flowers of this tree; severe vomiting and purging, with cramps and cold extremities, were caused by it.

Acting upon this hint, I prepared a tincture from the blossoms, and have administered it many times, with prompt success, in cases of cholera morbus. The action is similar to that of veratrum album. I had never heard of it before as having been used in medicine.

An article written by me upon this subject was published some seven or eight (perhaps ten) years since, in the *Proceedings of the American Institute of Homœopathy*—which year it was, I cannot say with certainty, as I have mislaid the number containing it.

I would say, with Dr. Wells, "Let the ailanthus be proved."

J. J. DE WOLF.

PERMANGANATE OF POTASH IN INFECTING ULCERS, OZENA, ETC.—After enumerating the divers disinfecting agents lately proposed, and coal tar in particular, the author (Dr. H. Ploss, of Leipzig,) does not hesitate to give his preference, at least under some

circumstances, to the permanganate of potash already recommended by Girwood, in 1857, and later by W. Hoffman, of London, and Dr. Reclam.

This salt disinfects rapidly the most fetid ulcers, in the proportion of two scruples to eight ounces of water in lotions or injections. The most favorable method is to cover the wound with lint soaked with that substance, and to place above this a layer of raw cotton, the latter having the property of filtering the air, and to retain the germs which determine putrid fermentation. In cancers of the womb it is necessary to repeat the injections several times a day.

The permanganate of potash serves also a very good purpose in freeing the hands from any bad smell contracted in post mortem examinations. For this purpose a stronger solution may be used (*m. i. to oz. i*) It is preferable to chlorinated water, not only to a disinfectant, but also as a preservative of contagion.

In ozena, a weaker solution should be used (*m. i. to oz. viii.*), and to correct the odor of decayed teeth, two drops of a concentrated solution of this salt may be used in a glass of water as a wash, or a few drops of a weak solution may be introduced in the cavity of the tooth on a small piece of cotton.

The same solution will be found useful in correcting the bad smell of the feet.

It is probable that the therapeutic application of this salt will, by further experiments, be extended to many other cases, such as scald head, fevers, pityriasis, etc. —*Paris Med. Gazette and Med. and Surg. Reporter.*

ATROPIA: ITS ACTIONS AND USES.—Atropia, when applied locally in solution (without spirit), is not a local paralyzer as commonly supposed, but it appears rather to quicken the contraction of the parts to which it is applied. Applied directly to the smaller arteries, atropia constricts them (Jones), and this effect may continue for many hours. It hence, probably, causes relaxation of the tissue of the iris, by causing constriction of the arteries entering it. In an atropized eye, the vision is clearer with distant than with nearer objects; this shows that the lens has receded and approached the retina, and is caused by a relaxation of the erectile structure of the ciliary processes, from the constricting action of the Atropia. This theory of the turgescence or emptiness of the vessels of the iris, causing, respectively, the contraction or dilation of the pupils, explains why we have wide pupil so frequently in atonic and exhausting diseases, in aneurism of the chest and neck, impeding the passage of blood into and through the

carotid. Worms and diseases of the belly in children dilate the pupil and impair the sight, probably by reflex action through the sympathetic nerve, exciting the radial fibres of the iris, and contracting the cerebral arteries (Dr. A. Fleming).

KALMIA LATIFOLIA IN NEURALGIA OCULORUM.

BY DR. L. G. JOHNSON,

I was called to see Mr. S., aged twenty-seven, Jan. 3d, and found him with severe pain in right eye, extending to the forehead. It would commence at the sun's rising, increase in severity until noon; then decrease, and leave at sunset. It was the fourth attack within ten years. Each attack would last from two to four months, during which he would become very weak. He had been under the treatment of an Eclectic for eight days when I first saw him. I gave Aconite and Belladonna. Jan. 6th, pain the same. Gave Kalmia, 1st dec., in water; ordered a teaspoonful to be taken every hour. The pain soon subsided, and in two days he was about his business, rejoicing that he had found a remedy for what he had been told was incurable.

ARUM TRIPHYLLUM.

Prof. Lippe says: "It is as important a remedy in scarlet fever as belladonna; and many otherwise fatal cases will it cure. It is exceedingly powerful. If too much has been given, the symptoms continue for five to seven days, and longer."

In clergyman's sore throat, if the voice cannot be modulated, with much secretion of mucus, it is very important.

An interesting article on this medicine will be found in the *American Homœopathic Review*, vol. iii, p. 28, 30.

Miscellany.

For the Am. Homœopathic Observer.

THE PRINCIPLES OF HOMŒOPATHY IN CONNECTION WITH NATURE AND HER LAWS.

BY J. M. LONG, M. D.

If we wish to be truly satisfied with any science, we must be willing patiently to study its revelations not merely in that

branch that reveals its most manifest deductions, but we must also trace the laws that it shows us, through all their varied developments. For instance, the science of Homœopathy is the Revelation of Laws that have always existed, and those laws branch out into every department of nature, and although we may declare that Homœopathy relates to the human organization yet we must enter the Mineral, Vegetable and Animal kingdoms in our investigations of its laws. That which is termed life-force or vital power, has manifestations in every form of life. Hence the action of agents homœopathically, or that life force in our form, must declare such action in all forms, in some degree. We find in nature and her operations, certain laws that are active. These laws can never be disobeyed by any form of life without injurious results. Any plant that is acted upon by elements that oppose its development and growth, must inevitably show the result in a deformed and irregular growth. Violation of law is not a wilful act in the plant, nevertheless, violation of law produces its effects. Perhaps we might more clearly say that the law that develops a plant is antagonised by other laws that retard growth; the law that is at the time active, governs the growth or development of the plant. Precisely the same action of laws upon the human organization produces the condition of health and disease. Hence, if Homœopathy is a science, that springs from the observation of these laws in the human organization, we shall find also a branch of this science in the natural kingdom, where the life force is in a lower degree of development, yet has the same general law of action. The plant for instance called Hellebore has a specific Homœopathic action on diseases of the nerves through what is termed a poisonous property! Now that plant through its vital life force received from the elements of nature its individual peculiarities. No other plant has precisely the same combination of elements; but there is the perfectly developed plant and the imperfect. The perfect gives us a pure combination of particles according to natural laws; an imperfect plant lacks some element that the perfect possessed. We know very well that if we plant

certain shrubs with a white blossom in the spot that has been occupied by a Barbary bush, the flowers will change in color. Gardens change the color of flowering plants by chemical process, and the off-shoots of these plants preserve the induced color. Now suppose that some delicate action had been excited upon the plant we instanced, the Hellebore; the plant would receive only such particles as it could assimilate. But might not that assimilation be changed by the conditions that surrounded the plant?—Homœopathically speaking the minute assimilation of combined elements might change the interior properties of the plant. The digestive operations of the plant is not subject to the destructive action that effects human stomachs; but all plants are affected by Homœopathic influences in air and water from vegetable and rock, now delicate and refined as are the particles that Homœopathy uses, those particles have each an atomic individuality and that atomic individuality is an exact representation of all the elements that combine to produce the properties that are used as remedial. Therefore the more refined and perfect the combined property, the more refined and perfect must be the atomic property. It is found that compounds chemically isomeric are not uniform in action. Hence there is a change produced somewhere in the attenuated particles that compose the compound. The primates cannot change, but the compound can, and it has been discovered that the human system will detect a change in the compounds of minerals so slight that chemical science through the action of acids or alkalies, or the various testing, agents fail to discern it. This discovery regarding mineral substances presumes a similar effect in vegetable substances. A remedy to be homœopathic in its action upon the human organism, must correspond in the progression of its particles to the condition of that organism: hence it is certain that a mineral substance will more favorably effect the bones, while a vegetable remedy acts more favorably upon the nerves. This opens for us a wide field of observation and of study, for the nervous life is allowed to be a higher form of life than the osseous, and though

one so interlaces itself with the other that we cannot separate them, yet each one has its specific sphere of vitality, as we know it by no other way than by the remedial effects of medicines. This link that Homœopathic science makes to the human system through the laws of progress, is one that claims attention. We must not be daunted by one failure for those accrue because of the laws of nature, and a remedy that is by its properties the right one for a disease in one case may prove insufficient in another, because of the laws of progress in plants and in minerals with relation to the human system, and also it may be inefficient because of the condition of the human organization which differs in individuals as much through progression as through disease itself. Hence in the totality of symptoms must be included the symptomatic action of the system which can be tested by the most infinitesimal particles. There is nothing hidden that may not be revealed by careful research and no step can be useless that leads towards the soul of all things, even into the laws of life, and the source from whence that life comes.

EFFECTS OF AN OVERDOSE OF MORPHIA.

A medical gentleman of this city, in whom entire confidence may be placed, gives us this item of his personal experience:

Intending to take about two grains of sulph. quinia for some slight error of digestion, I poured from a small vial in my pocket-case, what I estimated at four grains, and making it in two pills with glycerine, swallowed one pill. This was at 11 o'clock in the evening. I afterward ate pretty freely of apples, and sat down with my book. In less than half an hour I felt some change about my head and extremities, resembling the effects of morphia, and in an hour these effects were so decided as to lead me to suspect I had made a mistake in the medicine. There were two vials in the case, marked sulph. morph. and sulph. quin., but it was impossible to ascertain which of the two I had employed. Not having any chemical tests at hand, I simply tried the solubility of the remaining pill, and finding it not readily soluble in water, and conceiving it impossible that I could have made such a blunder as to take it from the wrong vial, I went to bed at one o'clock, under the conviction that I had taken quinine. My sleep was

unsound, and frequently interrupted by lively imaginings. Early in the morning I became wakeful, and took up a book whilst in bed, though my general habit is to sleep soundly till the moment of rising. After seven I arose to dress, but in a minute or two my stomach gave way, and I was forced to throw myself hastily on the bed to keep from vomiting. This symptom I recognised at once as the effect of morphia, and I was now satisfied of my mistake. But while in bed, I felt perfectly well, and though I tried again and again to rise and attend to my business, it was not till four in the afternoon that the stomach would suffer the head to remain erect. The pulse all day was 49 and 50, and the respiration 9 and 10: these, with occasional drowsiness, and an entire aversion to food, being the only abnormal conditions of which I was sensible. On the second day the head and stomach continued slightly disordered, and the bowels were constipated.

The quantity of the narcotic which I took was a little over a grain and a half, as I afterward found, by examining the pill. It may be well to add that the normal beat of my pulse is 60, that my physical temperament is rather sluggish, and that I am not accustomed to opiates, nor to stimulating drinks. Many years ago the eighth of a grain of sulph. of morphia produced much more narcotism than the present dose, although opposed by pain and nervous excitement. The result of my brilliant experiment illustrates the inefficiency of large doses of morphia compared with opium. I never before made such an error, and I am ashamed of it. But if you can put it to any use in elucidating the physiological effects of the narcotic, it is at your disposal.—*San Francisco Med. Press.*

NOVEL AND EXCELLENT INSTITUTION.—Dr. Chas. Cullis, of Bowdoin street, Homoeopathist, has for some time entertained the idea of an hospital for poor consumptive patients—homeless and unprovided for—which should also combine all the peculiarities of home for them, wherein their comfort might be gratuitously cared for until their death. This he has kept in view, more and more convinced of the benefit of such an institution, until at last he has realized his idea and established an hospital in which to commence and carry out as far as possible his benevolent intention. He has procured house No. 4, in Vernon street—a spacious and roomy dwelling—and is fitting it up for immediate occupancy. It has room for some twenty-five beds, and every facility for the comfort of patients, who will in this excellent home find every convenience that their necessities require. A matron of long

experience as a nurse has been engaged; and every regard will be paid, in careful medical treatment and watchful attention, to the unfortunates gathered within the walls of the Vernon street Hospital. The patients will be treated homoeopathically, and every practicable care exercised to relieve their last sufferings. Already liberal donations have flowed in in aid of the new object, and much is required in an enterprise so important. Every encouragement is afforded of its complete success, and we feel sure that it will commend itself to a benevolent public. Those so disposed can help the work by contributing money or such things as are essential to carrying on such institution—bedding, in particular, is needed, and those having anything of this nature in excess can do no better than contribute it to this object. Donations may be sent to the house of Dr. Cullis, 21 Bowdoin street, or to the hospital in Vernon street. We commend the institution to the attention of the benevolent.—*Boston Evening Gazette, Sept. 8, 1864.*

We hope Dr. Cullis will receive aid from some of our wealthy readers. The object is undoubtedly excellent. Will Dr. Cullis favor us with reports of the treatment at his institution?

INTERESTING CEREMONIAL.

On Tuesday evening, the new hospital in Vernon street, conceived by Dr. Charles Cullis, of Bowdoin street for the reception and care of poor consumptive patients, regarded incurable, was dedicated with appropriate ceremonies. The large attendance betokened the deep interest felt in the project and inspired the belief that the thing must become a permanency. The undertaking has been commenced in the full faith that every need has its attendant relief, and that the heaven which inspired the benevolent thought will raise up friends for its support. Though but a recent thing, and but imperfectly announced, it has found a wide sympathy. Voluntary gifts have poured in upon it, until the house procured for it at No. 4 Vernon street, has been furnished with the most essential articles of furniture from several sources—a proportion of the tinware having been sent from Canada for the purpose. It has already received a generous sum of money, and more will flow in as its claim becomes known. On the occasion of the dedication quite a number of clergymen were present, representing different sects, one—the Rev. Dr. Eames, coming from Concord, N. H., expressly to attend. The exercises were conducted by Rev. Dr. F. D. Huntington, who in introducing the

subject, spoke of hospitals as an outgrowth of the Christian faith—they were never known among heathen institutions—and in them were seen the spirit of him who went about doing good. He eulogised the present as one full of the spirit of Christ, inasmuch as it sought the poor and the dying as subjects for its bounty, extolling the founder who, with earnest faith and from his own spirit that had been touched by sorrow, had commenced this work that was to bear good fruit. After singing a hymn, Dr. E. A. Kirk read selections from scripture, with connecting words of his own, which was followed by a prayer of dedication and thanks by Dr. Huntington, closing with singing and the Benediction.

The ladies interested in the object had supplied tables, by the munificence of friends, with a bountiful collation, to which all were invited, after which the party repaired to the large parlor, where remarks were made, under invitation of Dr. Huntington, by Rev. Dr. Kirk, Rev. Dr. Hague, Rev. Dr. Eames, of Concord, Rev. Mr. Gardner, of Charlestown, Rev. Mr. Walker, of Bowdoin Square church, Rev. Mr. Fulton, of Tremont Temple, and others, all full of hearty sympathy and promised co-operation. A brief poem, written for the occasion, was read by B. P. Shillaber. After repeating the Lord's prayer and singing Old Hundred, that never should be omitted, the meeting was dismissed.—*Sat. Eve. Gazette, Boston, Oct. 1, 1864.*

BROMIDE OF POTASSIUM IN INDUCING SLEEP.—Mr. H. Behrend extols (*Lancet*, May 28, 1864,) this remedy in the treatment of insomnia and restlessness, accompanied by and dependent upon nervous excitement and irritability. Dr. Brown-Sequard first drew Mr. B.'s attention to this action of the article in question. Dr. Garrod, also, in his recent lectures on the British Pharmacopœia, states that the bromide of potassium in large doses produces drowsiness.

The cases in which this remedy appears likely to be most useful, Dr. B. says, are those in which the nervous element preponderates, and it is in this, that for the most part, opium and its preparations fail to produce any good result, and are not well borne by the system, frequently even adding to the excitement and irritability under which the patient labors. There can be no doubt, moreover, that cases of this type are unfortunately on the increase, since the highly artificial mode of life of the present day, especially in large cities, perpetually stimulates the nervous energy to the highest possible degree; so that even in the strongest constitutions the equilibrium

is but too often shaken, and the weaker ones yield speedily to the excessive demands made upon them. The dose of the bromide recommended (twenty-five grains three times a day) may appear large, but it is in all cases easily tolerated, and produces neither disagreeable nor toxic effects, the appetite is not interfered with, the alvine evacuations are regular and copious, and irritability of the bladder—a frequent accompaniment of restless nights—is generally relieved. The only unpleasant result Mr. B. has witnessed has been slight and temporary headache; and Dr. Brown-Sequard, Mr. B. states, has given it with perfect safety for several successive weeks in drachm doses. Of the temporary paralysis, and weakening of sexual desire and power, which are said to follow upon the administration of large doses of the bromide of potassium, Mr. B. has seen nothing. Mr. B. wishes to try this remedy in the treatment of delirium tremens, but has not had the opportunity since he has become acquainted with its action upon the nervous system.

THE INTRODUCTION AND PROGRESS OF HOMŒOPATHY IN THE UNITED STATES.

An Inaugural Address before the Homœopathic Medical Society of the County of New York, delivered April 11, 1864.

BY STEPHEN B. LIBBY, M. D.

We are in receipt of this address, from which we make the following extracts:

"In the course of human events, Hahnemann made known a mode, or rather a system, for the healing art, based upon positive physiological and psychological facts, by him expressed thus: 'In health, the vital force which dynamically animates the material body, exercises an unlimited power. It preserves every part of the organism in an admirable vital harmony, as regards sensation and action, so that the spirit which resides in us, and which is endowed with reason, is able freely to employ these living and healthy instruments, for the purpose of accomplishing the high end of our existence.'

"This is the basis of what is termed Homœopathy. Its basis is not, as some suppose, '*similia similibus curantur*;' this is but a branch of the system, and subscribing to this alone does not constitute a Homœopathist, as I hope to prove. Now, be kind enough, without prejudice, to go with me into an examination of the above quotation from 'The Organon of Homœopathic Medicine, by Samuel Hahnemann.' I shall assume, speaking generally, that its meaning is not clearly comprehended by all the

members of our school; and from this defect the spirit of Allopathy still mingles and exerts its pernicious influence in the practice of the art of healing. Hahnemann agrees with St. Paul in what constitutes a man—viz., body, spirit and soul. Of the body I shall say almost nothing; of the soul, but little; but ask your attention to the physiological fact in the term spirit.

"Volumes might be written on this subject; yet I shall attempt to bring to view what essentially constitutes life, or vitality, or spirit of man. The term vital force is expressed by the word dynamism; that is, spirit in action. To me it seems necessary that I should notice in the first place what is meant by mind. What is it? Whatever else it may be, it is that in us which takes cognizance of material things, and enables us to give them shape and expression. It is a result of brain action, its relations are strictly mathematical; it belongs to matter; it conceives of nothing else, and measures all things by a material standard.

"Ideas may be the result of a superior intelligence, but the conclusions the mind draws from them are always material: that is to say, the mind is of the body, through which the soul reaches the outward world. The human body is the clothing of the mind; the brain is its organ or machine, and the motive power is the soul. All the senses are used to convey to the mind external objects of whatever nature. In our bodies we perceive a principle, or a power, which develops phenomena. The results of this principle we term life. I cannot define what it is in essence, nor is it necessary; for it is a fact, what is useless to man, God has made impossible to him.

"Life is a reality, and is most closely allied to matter. Is it electricity? Is it magnetism? Is it the dynamism of material bodies? Is it itself material? It causes the circulation of the blood—it controls the functions of the human body and of all animal bodies. Whatever it may be in essence, it may be named *spirit*, and it is the cause of the phenomena we know by the word *life*. It is everywhere, causes life to circulate in the germ, and sends the sap upwards from the root through all the branches of the tree. It exists, but it has no *thought*, for it is controlled by that within, as Hahnemann has it, 'which is endowed with reason,' that is, the soul—the image of God in man. That it be in substance electricity, is possible, for this is found in modified forms in all bodies. It has not conscious intelligence like the mind, but 'it is a diffusive material substance which pervades all nature and gives life and shape to that which otherwise were dead and void of form;' itself being

managed by fixed laws established by the Creator.

"In the human organization there is something distinct from the outward decaying bodily structure, on the one hand, and the inner divine immortal principle on the other.

"Now, to me it seems that there must be something intermediate, a sort of connecting link,—a bond of union—between the material and the immaterial. Inert matter and divine life can hardly be in immediate contact. What, then, in man is between his system of nerves, through which sensation and intelligence are transmitted, and his essential soul? What is it that influences the contraction of muscles and the blood circulation? It is the principle of life or spirit, or, as Hahnemann has it, 'the vital force which dynamically animates the material body.' The mind is cold and mathematical in operation and effect. Spirit is warm, genial and diffusive. Mind concentrates its action on single points and on material objects. Spirit is fixed nowhere, but is everywhere to answer the purposes of life; and this may bind the finite to the infinite; the unseen power that unites the visible to the invisible; this is the impalpable presence, you perceive, which conveys to you the ideas I am uttering. For while mind is the result of the creation of thoughts, spirit is the medium of their transmission, and is the universal principle of life.

"My dear colleagues, all this, and much more, I perceive in the profound teaching through Hahnemann, in the quotation I read to you. This, I repeat, is the basis of Homoeopathy. Everything built upon this must be in strict harmony with it. Let us see. Hahnemann says: 'In disease, this spiritual force, which is active in itself and universally present in the body, is the only one which at first perceives the dynamic influence of the agent hostile to life. Having been disturbed by this perception, this force becomes capable of communicating to the organism the disagreeable sensations which it experiences, and of driving it to those unusual actions we call diseases.' 'It is only the disturbed vital force that produces diseases.'

"This definition of disease is enough of itself to revolutionize the materialistic doctrine of the allopathic school.

"2. The same spiritual power Hahnemann found in drugs; and that in each existed a force peculiar to itself, and capable of disturbing the healthy acting life principle in the human organism, developing phenomena like unto diseases from other causes. He also proved that each drug by its own spirit power could modify disease; that is, 'it is

in the dynamic action of drugs that their inherent force exclusively consists.

"8. Hahnemann announced that drugs cured diseases by virtue of a law, '*similia similibus curentur*,' or, like may be cured by like. This law he did not believe, (?) nor is it the cardinal principle of Homœopathy; but only, as it is, the basis of the therapeutic branch of it.

"4. 'Every physician,' says Hahnemann, 'adopting a treatment of such a general character, however unblushingly he may affect to be an Homœopathist, is and will always remain a generalizing Allopathist, *as without the most especial individualization Homœopathy has no meaning.*'

"I have thus brought to view the four propositions embraced by Homœopathy; in fact, they constitute it. No one of them can be overlooked in prescribing drugs for a disease. I conclude this branch of my discourse in the language of Dr. Cosnec, of Paris—viz: 'No; there does not and can not exist any conciliation between the two schools; whether Homœopathy be considered in its principles or in its method and means, there can be no possible conciliation. Homœopathy, being a radical reform in medicine, can concede nothing to the Allopathic doctrine; to try to conciliate the two schools, would be a step to the denial of Homœopathy.'"

CONTRIBUTOR REMLASS'S PAPERS.

No. 4.

Eloquence—Thoughts Concerning the Beauty of a Paragraph.

While glancing over your *Observer*, I was struck with the singularly simple, though truthfully beautiful and eloquent words appearing on the first page, the author being no less a personage than the founder of our science, Hahnemann. They commence: "I present you with a truth long sought for—a principle of eternal nature. I appeal to existing facts alone to convince you; and when a conscientious and complete course of study shall crown your researches with success, then, as I have done, bless Providence for the immense benefaction He has allowed to descend on the earth through my humble agency; for I have been but a feeble instrument of the Omnipotence, before whom we all bow in humility."

Can thought be clothed in more simple or concise words than these? Can eloquence find fitter terms with which to tackle the ever-doubting mind of man, and show him that there is truth there, if he will but investigate.

"I present you with a truth long sought for—a principle of eternal nature."

He gives to you who investigate, the truth of the science, "a principle of eternal nature;" he shows you a fact that has always existed, though it was never recognized till his time; he says, here is a truth that has long been wanted—long been looked for—I present it to you; and, to impress us with the importance of it, he says it is a truth of eternal nature: since the world was, has it been, and will continue to be so long as the world lasts. He wishes you to understand that this truth has always existed, though it never came to light till he unbarred the tyrant fetters of fogysm that kept it drowned in the sea of ignorance.

"I appeal to existing facts alone to convince you."

You are not merely to believe what he says; you are to look at facts before you—facts there for your inspection—facts that he knows, when properly weighed and measured, will convince even the most skeptical. And now what a thoughtful command is given to us:

"And when a conscientious and complete course of study shall crown your researches with success, then, as I have done bless Providence for the immense benefaction allowed to descend on the earth through my humble agency."

When success follows the thorough investigation of the subject—when all its truths are impressed on your mind—when you are convinced of the great good the discovery must accomplish, you are to *bless Providence*. How he recognizes a divine will, a divine power! You are not indebted to Hahnemann for your science, but to Providence. He admits himself to be merely the tool of a greater power than his—the divine.

"For I have been but a feeble instrument of the Omnipotence, before whom we all bow in humility."

He strives to impress upon us that what he has given to the world was through a power superior to his—even before whom we all are as nothing. Fellow-physicians, look upon yourselves as "feeble instruments of the Omnipotence," and, as a whole, imagine the mighty influences of a truth so combined and so universal as ours is destined to be, and which truth we have now in our hands, placed there by a divine power, through Hahnemann.

PROFESSIONAL ETIQUETTE.

G. S. B., of Cherry Valley, Ill., makes enquiry of the *Investigator* concerning a mooted point in professional etiquette: "Does it comport with professional dignity, or civility, for a physician, when called to a case which another holds under treatment, to assume the prerogative of taking charge of, or pre-

scribing for that patient, without his knowledge, or before he has been properly dismissed?"

Certainly not. A proper regard for the right of others is a mutual protection, in the profession and out of it. The Golden-Rule-principle embodies the best code of ethics ever yet published, and the true physician will be very loth to depart from its teachings.

Our correspondent makes a most excellent suggestion: "Where two, three or more Homœopathic practitioners are located in same city or town, they should at least be on speaking terms with each other. This would certainly redound to their interest and reputation as medical gentlemen, and especially as Homœopathists,—who should always be on friendly terms,—while it would deprive the self-styled "regulars" of one of the strong forts from which their slanderous missiles are hurled at our practitioners."

This is well said. A mutual friendship among neighboring physicians would put an end to bickerings and misunderstandings, and therefore strengthen our cause. We have often wondered that physicians so situated did not improve their leisure hours by more of professional intercourse and of real labor toward a common end. The best medical organizations are not always the largest. Three men could unite their efforts to prove a remedy, or to solve some physiological or pathological problem, and thus be more efficient than thirty isolated incompatible fellows who spend their breath in abuse and their brains for naught. Professional wrangling is a crime for which there is no apology.—*Med. Investigator*.

MEDICAL ETHICS.

Dr. J. P. Bloss, of Troy, N. Y., writes, "In our vicinity Homœopathic Practitioners (at least so advertised,) by a system of special advertisements in the daily papers in reference to female complaints, venereal diseases, having every casualty they attend the subject of a "Special Notice," etc., etc., are rapidly tending to bring us on a level in the eyes of the intelligent portion of community, with peripatetic "Clapp Doctors," "Liver Complaint Doctors," "Natural Bone Setters," and others resorted to only by the ignorant, and who flourish where the most patent medicines are sold."

UNDOUBTEDLY RICH.—A physician writes for an ounce of *Panacea semper curans*! (See *Observer* for September, page 181.)

"LIBERA AB OMNI SECTA COLI DEBET MEDICINA," is a motto of Dr. Wm. Arnold, a very great friend and defender of the late Dr. Griesselich, whose sarcophagus is and will be forever the "Hygea" a journal which he conducted with marked ability for fifteen years. G. D.

DISSOLVING POWERS OF THE PANCREATIC JUICE,—M. Corvisart has shown that in animals the pancreatic juice has the power of dissolving albuminous foods without the assistance of the gastric juice or the bile; and now he has demonstrated the same thing in man. A hospital patient, in perfect health, having suddenly died from chloroform administered for the reduction of the femur, M. Corvisart removed the pancreas; and with the prepared juice and ferment of it, operated on albuminous matters. He found that a large quantity of albumen and fibrin was rapidly digested with its assistance.—*Brit. Med. Jour.*

NEW FORMS OF DISEASE.

An irregular practitioner being called to see a lady-patient, who had failed to receive as much benefit as she expected from her former physician, after making an examination *per vaginam*, etc., etc., etc., very gravely remarked, that the form of the disease had been mistaken, the case was certainly one of inflammation of the *prostrate gland*. Another M. D. (?) also cures *colic* in the back.

Surgery.

THE REGENERATION OF BONE.—M. Ollier has again called the attention of the *Société de Chirurgie* to this subject. According to his experiments, the regeneration of bone is a settled fact. It occurs most readily and rapidly and certainly in the long bones. The preservation of the periosteum is an essential condition. In the case of the long bones, the extremities remain a long time in the state of cartilage before they consolidate into bone. The flat bones may be reproduced from their external periosteum. M. Ollier has in this way produced a solid bony covering for the nose out of flaps of periosteum taken from the frontal bone. The internal periosteum of the cranium, the dura mater, will also produce ossification. The mucous periosteum of the nasal fossæ, and of the palatine arch, also pro-

duces bony matter; but the production takes place slowly, requiring five, six, seven, and even eight months for its completion. The short bones may likewise be reproduced. M. Ollier has reproduced the calcaneum, the cuboid bone, etc., in animals. The new bone, he says, in these cases sometimes attains a size even larger than that of the original bone. Certain conditions are necessary for the success of the regeneration, and of these, especially, he refers to the thickness of the periosteum and its firmness.—*Canada Lancet*.

Students' Department.

MEDICAL LETTER NO. I.

MY DEAR FRIEND:—Your letter is before me, in which are propounded several questions. You desire to know if I would advise you to study medicine, with a view to engaging eventually in its practice. I answer, by all means, make medical science a part of the studies you pursue. While medical colleges are so numerous, and the cost of attending them is comparatively so light, no young man who expects ever to become in any sense a public character, can do either himself or society justice if he remains ignorant of the fundamental principles of medicine. The time is past for a man to hope to achieve eminence in any of the professions, and be ignorant of the sciences of anatomy and physiology. A professed minister of the gospel who attempts to talk learnedly about the mysteries of humanity, is an imperfect specimen of a true dispenser of the word of life. A man attempting the practice of criminal law in our courts of justice, who can not distinguish between punctured and lacerated wounds, or who does not know an os-calci from an os-uteri, is unworthy of the name or honors of a true legal man.

Let me conjure you therefore to prosecute neither these, nor any other profession, without first studying, at least, anatomy, physiology, and medical chemistry. And whatever the pursuit of your life may be, you will find in commercial, mechanical and professional callings alike, a knowledge of medicine of invaluable worth to yourself, and useful to those with whom you associate. By all means, therefore, spend one winter in attendance on a course of lectures at some medical college.

But as to the question of your entering upon the practice of medicine, that must depend upon several circumstances. First, have you a strong taste for the study and

labor that will devolve upon you in such an event? Is it because it will give you an honorable position in society, and a ready livelihood, that you propose to choose this profession, or have you a natural taste for the many unpleasant, arduous, unremunerative and responsible duties of a medical man? Are you willing to give up your nights and days alike, to the work of caring for the sick, calling no hour or moment your own? Think of these things and do not engage in the practice of medicine without you have a love for it.

Secondly, are you physically sound? A man who is a cripple, having a manifest disability of body or limb, should never become a doctor. Even slight deformities, no more than the loss of a finger, is likely to be powerfully magnified by the morbid imaginations of the sick. Pregnant and nervous females have a peculiar horror of such things.

But are you otherwise sound? Especially have you good lungs, a sound heart, and a healthy stomach? A sick doctor is a blind leader of the blind. He is of himself a libel on his pretensions to cure. The vitalizing influence of a physician's presence in a sick room, is often more potent to cure than his drugs.

Again, may I ask is your education sufficiently good? If you are not a perfect master of your mother tongue, pray don't dishonor the cause of medicine, and disgrace yourself by setting yourself for a "Doctor," which signifies a *teacher*. Don't address your first letter of inquiry, "To the Dean of the Homeopathy College." Too many such are already on file in my office. An uneducated physician is a monstrosity. Knowledge is too cheap for such beings to exist. In this country, in addition to a thorough English education, every medical man should have a passable knowledge of Latin. No man can use medical terms fluently, unless he has studied the language from whence most of the nomenclature of medicine is derived. By a plain English scholar, the *levator labii superioris alaque nasi* will be a term unpronounced, out of respect to the welfare of his inferior maxillary.

You ask how long it will take you to become a doctor. Certainly not less than three years; and if you have no beard, it will take you perhaps longer than that. The public demand age, because it betokens experience. And if you can make a display of a few premature gray hairs, it will prove a good thousand a year to you. Finally, if you are tall, portly, and good natured, I think you may safely venture to become a *Doctorus Medicus*.

CLEVELAND, Hom. College, Oct. 1, 1864.

T. P. WILSON.

Our Colleges.

HOMŒOPATHIC MEDICAL COLLEGE OF PHILADELPHIA.

Excerpt from Seventeenth Annual Announcement.

"The Board of Managers, in issuing the Seventeenth Annual Announcement of the Homœopathic Medical College of Pennsylvania, located at Philadelphia, are happy to bear testimony to its continued usefulness.

The number of medical institutions of this city, and the facilities which these afford for the prosecution of the study of medicine and the collateral sciences, have won for it the title of "Medical Metropolis" of the United States. Side by side with these time-honored and influential institutions, which are supported by immense interested patronage,—our own college, the oldest of its kind in existence, has striven nobly and not vainly to become established.

Men of thorough medical education and scientific acumen no longer regard our homœopathic law as a mere speculation, but as the evidence of a more enlightened and progressive era in medical science.

Alloecopathy, in all its varied forms, confesses its inability to produce any equally positive or accurate rule of practice. It can teach indeed but the prolegomena of our own true doctrines."

Prof. Heerman writes: "I know that it must give you some satisfaction, in your just appreciation of the truth, to feel that we begin our work with a determination to give to those, who come among us, every practical advantage in medical education, to lay before the profession our faith in pure homœopathy, and prove our capacity of substantiating that faith and sustaining the honor entrusted to us.

Our design and prayer is to befit for the world's use true ministers of our vocation."

Personal.

A. T. BULL, M. D., and HUBBARD FOSTER, M. D.—We understand that Dr. Bull of London, C. W. and Dr. Hubbard Foster, recently of Clifton Springs, N. Y., have formed a copartnership for the practice of homœopathic medicine and surgery, at 54 Swan st., Buffalo, N. Y. Dr. Foster acquired an enviable reputation while in charge of the Clinton Springs cure, N. Y. Dr. Bull, at London, by his professional skill, uniform success, snavity and gentlemanly bearing, has made a host of friends. We shall ex-

pect to hear of their establishing a very lucrative practice at Buffalo.

R. J. P. MORDEN, M. D., succeeds Dr. Bull at London. Dr. Morden was formerly a student of Dr. Bull. After graduation he went into practice on his own account, at London. Being an attentive and skillful physician, he will doubtless fill Dr. Bull's place as well as any one.

S. BAILEY, M. D.—We copy from the *Paulding Gazette* the following:

"I am, as you are aware, an allopathic physician, now in the practice of medicine in this congressional district. I was in Toledo a few days since, and learned the following facts: S. Bailey, M. D., seems to have been appointed examining surgeon through the kindness of Hon. J. M. Ashley. Dr. Bailey is a homœopathic physician. While this is true, strange as it may seem, Dr. Bailey is said to be a gentleman of undisputed attainments and skill as a surgeon. But, he is a homœopath! I learned, too, while in Toledo, to the great shame of the medical profession, that the allopathic physicians were aiming to make a political hobby of the appointment of Dr. Bailey, and were asking the physicians of that school in the district to oppose Mr. Ashley's election; not because he recommended a man unqualified for the position, but because Dr. Bailey is of the homœopathic school. I learn that this move was instigated by a Copperhead physician of Toledo."

PROF. NEIDHARD.—In "New Proving" due credit should have been given to Prof. Neidhard for his valuable provings of Gelseminum, and for practical notes and observations concerning several other remedies. The omission was entirely unintentional.

B. L. HILL, M. D. (U. S. Consul at San Juan del Sue) is now home at Berlin Heights, Ohio. We regret to hear that the Doctor is suffering from Aphonia.

WILLIAM CULLEN BRYANT (a friend of Homœopathy, better known as one of the sweetest poets), is to be the recipient of a testimonial in the Century Club of New York, on Saturday evening, the 5th of Nov., upon the occasion of his reaching the allotted span of years for man—three score and ten. Longfellow, Lowell, Dana, Whittier, Holmes and others have been invited, and will be there.

GERMAN HOMŒOPATHIC PHYSICIANS OF THE NORTHWEST.—The German Homœopaths hold their meeting at Chicago on the 16th of November.

Homoeopathic Observer.

Vol. I.]

DETROIT, DECEMBER, 1864.

[No. 12]

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Editorial.

We present you with the closing number of the first volume of the "*American Homoeopathic Observer*." To those friends who have aided us with contributions we wish to say that we are satisfied that the steady improvement of the Journal, in interest and value, is mainly due to their efforts, and we

feel grateful for their generous assistance.— Those who have promptly furnished the "*sinews of war*," cash subscriptions, will accept our thanks. Others who have betokened their interest by sending, unasked for, subscriptions for the second volume are remembered with pleasure. For the new year we ask for further aid from both contributors and subscribers. We desire to make the "*Observer*" worthy of hearty support. Many improvements are contemplated. Instead of 16 pages we propose printing 32 or more, or 400 for the year.— Advertisements to be excluded from the outside of cover. The reading matter to be eminently practical in character. We shall keep in view the fact that the majority of our readers are physicians in active practice, that they desire information which can aid them in their every-day duties rather than prosy discussions or tedious descriptions.— We shall not reprint matter which every well-read physician has already studied. Knowing that a mere hint to a wise man will excite to profitable thought and action, we shall prefer a mere brief mention to elaborate articles of no present utility.

Of the many responses to our call for subscriptions, no one has been more gratifying than the following, which enclosed payment for two years: "E. A. LODGE, M. D.—My Dear Sir: I have watched the progress of your infant monthly with pleasure and profit, and feeling that it has within it the elements of the Giant, I subscribe for my share in the enterprise. Please pass the enclosed bill to my credit. Very truly yours,
"F. VANDERBURGH."

"I could not get along without your *Observer*. I come in after a day's work tired, sit down, and am soon absorbed in some of its pithy articles, soon forget my weariness,

elve times a year paid for the
osts. Success and long life to
er and editor."—C. C. OLMSTED.

YOU BEEN OVERCHARGED?

ber of copies of New Provings
out by the American and United
press Companies, under contract to
r *twenty-five cents each*. We have
instances where 50 cents, and in
ses 75 cents has been collected. Our
ers who have been charged over 25
ill please notify us, that the proper
ion may be made.

Book Notices.

**THERAPEUTICS OF RETROFLEXION
AND RETROVERSION OF THE UTERUS.**
By EDWIN M. HALE, M. D., Author of "New
Provings," etc. Pamphlet, pp. 24. Chicago:
J. S. Halsey, 147 Clark street. 1864. For sale
at Detroit Homœopathic Pharmacy. Price 30
cents.

The author of the "Monograph" has the
happy faculty of selecting those subjects for
discussion about which the Homœopathic
profession are most anxious to receive in-
formation. His work on "New Provings"
has had a reception of which the author may
well be proud; nearly three-quarters of the
edition having been sold in two months after
its issue. We predict for this little *brochure*
an equal popularity. The paper which
made the basis of it was read before the
Illinois State Homœopathic Association, in
May, 1864, and such was the interest mani-
fested in the subject at the time, that Dr.
Hale has added largely to the original paper,
and illustrated the subject with excellent
plates of the peculiar malposition of the
uterus; the method of cure, and the instru-
ments used in treating the disease.

Although *Prolapsus uteri* has been treated
of quite extensively in the literature of the
Homœopathic school, *retroflexion* and *retro-
version* has hardly been noticed. The only
notice of the former being a paper by Dr.
Madden, in the *British Journal*, and of the
latter, short contributions from Drs. Preston
and Shearer, in the *Philadelphia Journal*. In
the work before us the author has worked
up the subject as much as possible in a
work of its size. The symptoms, pathology,

mechanical and medicinal treatment, are all
briefly and plainly set forth. Every inves-
tigating physician should have this Mono-
graph, which we hope will only be the fore-
runner of a more complete work on all the
diseases of the uterus.

FROM C. A. GARNSEY, M. D.

"I am, at last, in receipt of "New Prov-
ings," by Hale. Being an invalid, I was
just in condition, from a feeling of *ennui*, to
receive something new. I am sir, as you
have judged, enthusiastic. Did you ever
know a sangui-nervous man that was not?
To say that I was "agreeably disappointed"
don't convey my idea of such a task. Why,
sir, I never sat down to the perusal of but
two books in my life that afforded me such
delight and satisfaction — the Bible and
Shakespeare. It is often a thankless task
to write a book, and a pecuniary loss to
publish it. No man, in his senses, will dare
predict such an issue of the "New Prov-
ings." Independent of the boon to the
Homœopathic profession of the pathogene-
sis of indigenous remedies, the work is re-
plete with erudition, bold, outspoken
thought, originality, and genius. If Hale
never writes another work this will stamp
the man. It will puzzle many a *wiseacre*
when he finds his cherished foggyism upset,
and put many an old and young head to
thinking and experimenting. Long life to
Hale and the publisher."

**NEW REMEDIES; their Pathogenetic Effects
and Therapeutical Applications in Homœo-
pathic Pract. ce.** By Edwin M. Hale, M. D.

"The object in the preparation of this
work," says its author, "has been to furnish
the physicians and students of the homœo-
pathic school of medicine with full and ac-
curate information relative to a class of
remedies, mostly indigenous, but few of
which have had any place in the published
Homœopathic Materia Medica. *
After several years spent," he adds, "in the
investigation and study of the new remedies,
publishing from time to time items of my
experience with them, I was induced to at-
tempt the work of collecting all that had
been published concerning the indigenous
plants of this country, and to add to such
all the knowledge clinical and theoretical,
which could be gleaned from my colleagues,
together with my own." The result is a
volume of rare value, we should judge, to
the practitioner. Dr. Hale, while he has no
superior in Chicago as a physician, is pecu-
liarly devoted to the science of his profes-
sion. He is already before the world as an
author, having published a "Monograph on

Gelseminum," and a treatise on "Abortion and its Homœopathic Treatment." The work now offered to the public, especially to the gentlemen of his own profession, is a large octavo of some 450 pages, discussing in their botanical and medical relations nearly fifty new remedies, nearly all of which are indigenous in this country. It is the work of a scholar and a conscientious and skilful physician. — *Christian Times, Chicago.*

Practice of Medicine.

ARUM TRIPHYLLUM.

DR. LODGE—*Dear Sir*: Owing to an oversight which I much regret, the following article on "Arum Tr., in Scarlet Fever," was not embodied in the volume of New Remedies. Such oversight is to be regretted because the remedy bids fair to form a valuable one in that disease. Our profession is much indebted to Drs. Henry and Lippe for many excellent provings and clinical notes relating to our indigenous remedies. The paper referred to was published in the *American Homœopathic Review*, volume 3, page 28. EDWIN M. HALE, M. D.
Chicago, Oct. 24, 1864.

ARUM TRIPHYLLUM IN SCARLET FEVER.

By Ad. Lippe, M. D., Philadelphia, Pa.

The few symptoms published in the thirteenth volume of *The Archiv*, of Arum maculatum, are very similar to those of Arum triphyllum. This very valuable medicine was first introduced as a remedy in scarlet fever by Dr. C. Hering, and the attention of the profession was first called to it in number nine of *The Homœopathic News*. Since then many cases of malignant scarlet fever have been successfully treated by this new remedy, and some indications for the administration of this medicine can now be given.

I shall first relate one of the most malignant cases in which Arum triphyllum was administered with marked benefit. The case is taken from my journal, volume 1, page 24.

The patient was a boy six years of age, who had always been under my care, and who had enjoyed general good health. His older brother had scarlet fever and was attacked on the 14th of February, 1861. I saw him in the morning, he complained of headache and had vomited some food and mucus; he declined to rise in the morning,

pulse 120, full and hard, gave one dose of Belladonna .200; at 2 p. m. he continued to vomit, had much thirst for cold water, face very pale, coma, Tart. emet. .200. At 7 p. m. I found him much worse, the face very much paler, continued coma; when aroused he complained of much headache; every ten or fifteen minutes a watery, very offensive, involuntary stool; pulse over 200 a minute, Sulph. .200, six pellets dissolved in half a tumbler full of water, and every two hours one tea-spoonful to be given. At 1 a. m. he became very restless and the eruption began to appear all over his body.

In the morning at 7, the 15th of February, he was fully covered by the scarlet fever eruption, the diarrhoea had ceased, the headache was almost gone, he had slept and the pulse was now 120. Medicine was discontinued. On the 16th he did well. On the 17th his nose was much stuffed up, the corners of his mouth became sore, no evacuations; he had slept poorly because he could not breathe well except with his mouth open. Lycopodium .200. On the 18th he had had a bad night, very delirious, the nose had discharged a good deal of thin, watery, ichorous fluid; nose sore, lips very sore, cracked and bleeding, as well as the corners of the mouth; the mouth felt very sore inside that he was unable to drink; tongue red, papillæ swollen and standing up; between the abdomen and the legs, sore moist places, the same on the os coccygis; the submaxillary glands swollen; pulse 140, hard and full; voice hoarse. Arum tr., six pellets of the sixth dissolved in half a tumbler full of water, and every two hours one tea-spoonful to be given.

On the 19th, slightly better, gave Arum trip. .30, which I had freshly prepared in water as before. On the 20th, still better, medicine continued every four hours.

On the 21st, a still more decided improvement; had passed a great deal of very pale urine, and hawked up a good deal of mucus. He continued to improve without further medicine up to the 13th of March, when he was seized with violent coryza, nose much stuffed up; Nit. ac. .200. One dose relieved him until he again complained on the 20th of March, at night, of a hoarse, dry, croupy cough, and great hoarseness, which yielded to one dose of Hepar .200.

On the 2d of April, he again became hoarse, worse in the morning, and hard of hearing. One dose of Causticum fully relieved him and he remained well. The similarity of Nit. ac. and Arum triphyllum in the second stage of scarlet fever are very great. The coryza of Nit. ac. has not the red tongue.

The most indicative symptoms for Arum are the great sore feeling of the mouth, the

redness of the tongue, the elevated papillæ, the cracked corners of the mouth and lips, and stoppage of the nose without much coryza. Urine very abundant and pale, the submaxillary glands swollen. The eruption all over the body with much itching and restlessness. Arum very often causes a great hoarseness, and while other symptoms will improve, the hoarseness will become much worse if the medicine is continued too long.

HYDRASTIS CANADENSIS IN SORES AND ULCERS.

BY DR. HASTINGS, SURGEON, ETC.

In the May number of the *Homœopathic Review*, I promised to send you a report of the case to which reference was therein made, in the notice of the Cheltenham Homœopathic Dispensary, and now gladly fulfil my promise.

The patient, William Parks, aged 82, was admitted on the books of the Dispensary December, ultimo. He is a mason's laborer, and in September, 1861, nearly three years before being admitted into our Dispensary, fell off a scaffold, and injured his right arm very much.

In the November following he became an out-patient at the Allopathic Dispensary, but derived no benefit. He was then advised to go into the Hospital, which he did, and remained there for some time, the disease, however, continuing to progress, so much so, that the surgeons advised him to have his arm amputated, to which he objected, and consequently left the Hospital.

When first seen at our Dispensary his arm presented a fearful appearance. From the tips of his fingers to the elbow it was much swollen, and was one mass of sores, discharging a foetid pus; and even from the elbow to the shoulder it was much enlarged, and had a few sores there too. The glands in the axilla were tender and swollen, and his general health was in a sad state. He was much reduced in flesh, and exceedingly weak and nervous, owing to the constant and severe pain in which he had been so long subjected, and the consequent want of sleep. He was not at all able to move his arm, and all motion at the elbow had ceased for some time; and as it was much enlarged about the elbow, and full of sores, I much feared that the joint would be stiff, if not ankylosed.

We at once prescribed the internal and external use of *hydrastis canadensis*, in a mixture composed of tinct. hydr. can. c. dr. i. to aq. oz. xii., a table-spoonful to be taken 3 times a day, and a lotion composed of tinct. *hydr. can.* dr. ii. to aq. oz. xii., to be kept

constantly to the arm, by having cloths wrung out of the lotion.

When he next presented himself at the Dispensary, i. e., in three days' time, the arm had a more healthy look, the sores disposed to heal, and his nights had been tolerably good, having had better rest than he had had for the last two years.

As this patient was under treatment for about four months, I will not occupy space in minutely narrating the different steps in the treatment, nor the changing phases through which the disease passed during that time; suffice it to say that his arm became quite well, the motion of the elbow joint restored, and, I believe, he has been for the last two months (now 5th July) following his usual occupation, feeling no inconvenience whatever from his arm.

Another case in which *hydrastis* worked wonders, is as follows:

J. R., Esq., dentist, hurt the thumb of his right hand, causing it to bleed; and he believes that in his occupation he must have poisoned the wound, as intense pain soon followed the infliction of the wound, attended by much swelling, extending all up the arm into the axilla, the glands of which were much swollen.

He consulted one of our leading Allopathic surgeons, and, of course, had blue pill, &c., administered, poultices, &c., applied, but of no avail. In a day or two from his first consulting the surgeon, the thumb was laid open by a lancet. After this the pain became more intense than ever; all rest, night or day, was now at an end, irrespective of strong doses of morphia; and it was now the intention of the surgeon to have a consultation on the following day, administer chloroform, and have the thumb again opened, and if that did not suffice, to amputate the thumb!

Both the patient and his friend now became alarmed, and determined to consult me, which they did. The arm was now very much swollen, and so painful that he could not bear to have it even touched, and the thumb measured in circumference four and one-half inches, having a livid, irritable mass of proud flesh, projecting from where the thumb had been cut; sometimes bleeding much—caustic applied frequently. The pulse was small, weak, and 160; tongue white at edges, and brown in the centre, &c., &c.

He had been ordered to take mutton chops, beef tea, porter, port wine, &c., which he did most reluctantly, as he had to take them entirely against his feeling, having neither appetite nor relish for them, but thought he must take them, as they were ordered.

These I *absolutely forbade*, and told him

to take nothing but iced water and gruel; and never shall I forget his and his friend's looks of astonishment when they heard this, and their exclamation was, "But, Doctor, he'll sink." Said I, "*with them* to a certainty, but not *without them*, with proper treatment."

I ordered to be applied to the hand, arm and shoulder finely pounded ice, and to be renewed repeatedly. *Acon.* om. 2 horas.

Next day rather better; had some little sleep during the night; pain diminished.

Same diet; ice applications to be continued, with *hydrast.* lotion, and *hydrast.* mixt. internally.

From this date there was a constant improvement: pain subsided, swelling decreased, sleep and appetite returned, and in a month from his first consulting me, his thumb was quite well.

Another case. The Right Rev. Lord Bishop of ———, consulted me, on the 13th May ultimo, about an ulcer on his heel, over the *tendo Achillis*. His lordship stated that he hurt his foot about six weeks ago, and since then had consulted medical men on the continent, and had just been under two Homœopaths in London, but had derived no benefit whatever from their treatment. The Homœopaths in London had frequently applied caustic to the ulcer, but it only aggravated it.

The patient's age is 61 years; subject to calculi, and of a gouty constitution; fond of good living.

When I saw his foot it was much swollen and inflamed all around the heel and instep, and over the *tendo Achillis*, and extending on either side there was an irritable ulcer, with jagged and raised margins. The ulcer and foot were so painful that his lordship's rest was much interrupted.

He was, as the former patient, ordered "to live well and generously," and he was, like a good bishop, *obeying orders*. This I to a great extent forbade, and after carefully regulating his diet and regimen, I ordered the *caustic* dressing to be removed, and a lotion of *sanguinaria* to be applied, and instead of *silicea* and *lycopod.*, which he was ordered to take *regularly in alternation*—shade of Hahnemann!—I substituted *merc. sol.* 12, manequa nocte.

In three days after this, saw him. No apparent change in the foot or ulcer, though less pain and more sleep. Now ordered *hydrastis* lotion, and *hydrastis* internally, and in a few days there was a decided improvement in every respect; and under this treatment, varying the strength of the medicine at times, and occasionally omitting the medicine for a day or two, the patient continued to progress rapidly, so much so that he wrote to me on the first instant, as follows,

about six weeks from the time I first saw him:

MY DEAR SIR—I am sure that you will be gratified to learn the success of your treatment of my troublesome heel.

It is quite skinned over, at last; though it still seems to be somewhat tender."

Remarks.—I think the above three cases justify me in laying the treatment before my professional brethren, in order to induce them to give *hydrastis*, in such cases as the above, a trial, if they have not yet done so. I wonder if Dr. Scriven tried *hydrastis* in the case of the late Archbishop Whately.—*Monthly Hom. Review.*

DEAFNESS.

BY E. M. HALE, M. D., CHICAGO.

Diseases of the ear are too much neglected by physicians of both schools of medicine. It has the unhappy effect, in this country especially, to throw the treatment of diseases of the auditory organs into the hands of charlatans and empirics to such an extent that the ear-patient is far safer who neglects his disease entirely, than he who trusts to the bungling treatment of so-called aurists.

We have in our *Materia Medica* a great many remedies which effect the ear in a specific manner, and are capable, when properly applied, to cure a majority of the diseases of the ear. But before we can prescribe them successfully we must learn to diagnose ear affections correctly. This requires a thorough knowledge of the anatomy and physiology of the ear, and the pathology and symptomatology of ear diseases. Perhaps not one in one hundred physicians of either school have paid any attention to the subject. They never *seek* ear-patients, and are generally glad when they are rid of them.

The importance of a thorough knowledge of ear diseases can hardly be overestimated. They form a large per centage of the diseases of childhood, and are often productive at that tender age, of serious lesions of the organs of hearing, and even disease of the brain and its membranes, by extension of inflammatory action. In adults, ear affections are not uncommon, and cause more discomfort and trouble than many imagine.

Deafness, especially, deprives one of many of the enjoyments of life, as well as being a serious obstacle to one's usefulness.

The two following cases are reported, not so much for their importance, as for the purpose of illustrating the proper manner of applying the homœopathic remedy.

CASE I.—A lady, aged 30, complained of dulness of hearing; humming and roaring in the ears, and occasional sounds as of a report in the right ear. Upon examination no excess of cerumen, nor any disease of the external auditory canal was apparent. The condition of the throat was inquired after, and was informed that it felt sore and swollen, and that there was a constant disposition to "hawk," to expectorate masses of tenacious, yellow mucus. Upon examination the mucous membrane of the fauces was swollen; appeared mottled. This appearance was owing to an enlarged condition of the mucous follicles, which were red and the exudation of yellowish mucus, which adhered in small patches to the surface.

Diagnosis.—Dulness of hearing from catarrhal inflammation of the eustachian tube, by extension of the disease from the throat, with partial closure of the pharyngeal orifice.

Treatment.—*Mercurius iodatus, rub.*, one grain every three hours, and a lotion composed of two grains of pulv. *Hydrastis* to one pint of water, to be used as a "gargle" in alternation with the medicine.

In two days the hearing had much improved, and the throat had improved. Same remedies continued at longer intervals. *Cured* in a week.

CASE II.—A gentleman of middle age applied for the relief of a troublesome snapping, whizzing and roaring in the left ear, accompanied with considerable hardness of hearing. All the symptoms were aggravated upon blowing the nose.

Examination showed nothing abnormal about the external meatus, except a slight redness of the walls of the canal. Inquiring in relation to the throat, however, revealed that the patient had a sensation of scratching, tickling and rawness of the fauces. The pharynx was found congested, bright red,

and covered in places by clots of mucus. He complained of stitches extending to the ear when swallowing.

Diagnosis.—Deafness from catarrhal inflammation of the pharynx, which had caused a closure of the orifice of the eustachian tube. The inflammation probably extended into the tube and cavity of the tympanum.

Treatment.—*Hepar. Sulph.*, 3d, one grain every three hours. On the third day the hardness of hearing had decidedly improved, but in the throat were several spots, having a diphtheritic appearance. *Phytolacca dec.* Three pellets were alternated with the *Hepar. Sulph.* at intervals of four hours. At the end of three days the spots had disappeared, the mucous membrane of the pharynx and fauces looked quite natural, and the hearing was as good as ever.

NOCTURNAL ENURESIS.

FROM MY REGISTER—L. S. M.

This very troublesome affection has been successfully met in our practice in several cases; the most prominent of which I will detail:

Oct. 20, 1863.—Mrs. G. called for advice and treatment for her daughter, a young lady of 17 years. She has been afflicted with nocturnal enuresis for the past ten years. Has been under medical treatment from the leading Allopathic Physicians of Binghamton, Owego, Elmira, Bath, and this town, without any mitigation or relief, and as she alleged, at an expense of five hundred dollars. After relating the circumstances she inquired, "Can you, Doctor, do anything for her?" "Yes, madam, if you will give us opportunity and time, and faithfully follow directions, and report from time to time." "What will it cost?" "Simply our regular fee." "I will give you fifty dollars, Doctor, if you will cure her." "Well, madam, let us see your daughter. We do not do business that way, of charging a specific price for a cure. We simply charge for medicine and advisement, our regular fee."

The young lady called soon after, with her mother. She was found to be intelligent, modest, with some intellectual culti-

vation—temperament, nervous-bilious; complexion, sallow and pale.

From Mrs. Morgan's diagnosis we prescribed *Benz. Acid*, 2d dec. tr. Three doses, to be taken once nightly, as the urine was very high colored, of very strong and offensive odor, and very copious every night. As an adjuvant, *Canth.*, 3d dec., was given twice a day following the *Benz. Acid*—continued for three days. *Podophyllin*, 3d dec., was given then once a day. *Belladonna* at night.

Nov. 3.—She called and reported that she had had no *enuresis* since taking the first dose of *Benz. Acid*. Her bowels were becoming regular under the influence of *Podophyllin*. *Benz. Acid* was repeated once in three days, with *Hysos.*

Nov. 14.—She called and reported improvement in general health.

Nov. 20.—Some catarrhal troubles, with cough from taking cold, were relieved by *Bry.* and *Eryngium*.

Dec. 8.—This entry is made on our Register, "Miss G. is cured of a long standing *enuresis*. Her mother thinks she wants no more medicine." Bill—\$3.75.

She had had no further trouble of the nightly *enuresis* since taking the first dose of *Benz. Acid*. She has improved every way. Her constipation has gone, her bowels have become soluble and regular, and she is fleshing up, and her pale, sallow complexion has gone, and she now exhibits one tinged with the glow of healthfulness and beauty.

Oct. 20, 1864.—Miss G. has continued free from *enuresis* during the past year, until about two weeks since her complaint returned. A similar prescription has produced the like results, and she is now free from the trouble.

Several other cases of nightly *enuresis* I might also detail. One of great obstinacy, which resisted the usual remedies, was relieved on *Carb. veg.* and *Iron hyd.* persisted in nightly for ten or fifteen days, when the difficulty was suspended.

R. *Veg. carb.*, 1 gr.

Iron by Hydrog., $\frac{1}{4}$ gr.

Sachr. offic. 1 gr., taken every night.

Other cases have yielded to *Cantharis* and *Podophyllin* after a few days.

[EDITORIAL NOTE—Would not Nitrate of Uranium alone have cured this case?]

SMALL POX IN LONDON.

In 1863 no less than 1537 patients, (fifteen of whom were not suffering from small pox,) were admitted into the Small Pox Hospital in London. The deaths amounted to 274, or 17 per cent. of the whole admissions. Of the whole number 247 were unvaccinated, and 1273—no less than 83 per cent. of the admissions—vaccinated. The deaths among the unvaccinated averaged 47 per cent.; among the vaccinated 9.9 per cent.

PHYTOLLACCA.

Dr. C. H. Lee reports, "I have had several cases of true Diphtheria and cured them with *Phytolacca* dec. In other cases I have given it, and no improvement, then I would give the Protoiodide of Mercury and it would not act. Using the *Phytolacca* and Protoiodide of Mercury in alternation I have had most marked success. This mode of treatment may be of some use in the practice where other remedies will not act."

Surgery.

CONCENTRATED NITRIC ACID IN WHITLOWS.

BY C. C. OLMSTED, M. D.

DR. LODGE—Dear Sir: I wish you would call the attention of the profession to the use of concentrated nitric acid in whitlows. If you will refer to No. 84 *British Journal of Homœopathy*, page 218, you will there see an article from the *Allg Homœopathische Zeitung*, by Dr. J. Hirsch, of Prague, on "the speedy cure of whitlows by the external employment of a remedy acting specifically." A few days after I had received the *Journal*, and read the above article, a bricklayer came into my office saying that he had a felon he wanted lanced. I examined it and pronounced it a whitlow. It had been progressing five days, and was extremely painful. It had kept him awake for three nights and he was nearly worn out with the pain and loss of sleep. I told him I wished to try a local application on it for twenty-four hours, and if it gave him no relief at the end of that time I would open it for him. He consented, and for the benefit of those

who have not seen the article I will describe the method recommended, which I used: I obtained some good nitric acid, a bowl of water and a match. I sharpened one end of the match, put it into the acid, and moistened the finger where the pain was the most severe. As long as I confined my application to the inflamed part it caused no pain, only a sensation of warmth, but as soon as I got beyond that the pain was very severe. I then had him put the finger in water until the pain subsided, which it did in a few moments. After applying it freely I requested him to report again at noon. At 9 a. m. the first application was made. he came as requested, saying soon after I made the application the pain began to subside, he went home and slept until noon. At 1 p. m. I applied it as before, and again at 9 p. m. The following morning he reported having slept all night, and awoke in the morning with but little pain in the finger. After applying it in the morning I requested him to report if it should cause him any further trouble. I saw him about a week after, and he said in less than an hour after I applied it the last time the pain all ceased. The following day he went to work, though the finger was sensitive for several days. In the course of three or four days the dry and hardened pus came away in scabs.

During the past eighteen months I have used it in like manner on eight different cases of whitlows, with equal success, after they had progressed from two to six days, with the use of this remedy. I have also used it in several cases of what is commonly called "run around" with equally good results. In using the acid great care should be taken that you do not moisten the surface beyond where the inflammation extends, if you do, the pain is very severe. If you should, put the part in water a few moments and it will subside. It should not cause any pain. I give you a report of this case to show what I have seen it do, although it was no more severe than some I have since treated. If this remedy will do for others what it has done for me, and what Dr. Hirsch represents it will do, it ought to be more generally known than it is.

I will quote a few lines from his article: "That the nitric acid is to be considered as purely specific in the cure of whitlow is indicated on the one hand by the circumstances that many and various experiments produced the conviction that no other concentrated mineral acid has the power of producing these curative effects; whilst on the other hand a glance at Hahneman's *Materia Medica* ought to suffice to discover there, unmistakably, the picture of whitlow under the symptom of Nitric acid; for instance,

painful tumor of the finger end; suppurating pustules on the end of the thumb."

Preference is given to wood to moisten the part, because it would not take up enough of the acid to drop as a metallic substance might, and a match is always readily obtained, is small, and soon sharpened for use. I should be pleased to have some others try it and report their success.

REMOVAL OF A BOUGIE FROM THE FEMALE BLADDER.

Miss S——, aged about 24, of stout habit and well developed, found herself enciente, and at the fourth month determined to rid herself of the troublesome incumbrance. She was informed by a female friend that it was easily accomplished, all that was necessary being to introduce a large bougie into the womb and rupture the membranes. For this purpose she procured the largest size gum bougie, fully three-eighths of an inch in diameter. Not being very conversant with the structure of the parts upon which she was about to operate, she introduced the instrument into the urethra, and passing it in its full length, she became frightened, and letting go of it, it passed into the bladder. She did not know what to do under the circumstances, possibly supposing that the womb would contract and expel both the instrument and child, and a day elapsed before she applied to a physician.

On examination, he found a very singular state of affairs. He could feel the instrument, but was at a loss to determine where it was, as she insisted firmly that she had passed it into the uterus. I was called in consultation on the evening of the second day, and on examination, detected the bougie coiled up in the bladder. Placing her on her back, I at once commenced to dilate the urethra with small rectal bougies, and in the course of fifteen minutes was able to pass my index finger through the urethra into the bladder, bringing it in contact with the bougie coiled up. Now withdrawing the finger, I introduced a pair of small, serrated polypus forceps, and after some time obtained a firm hold of the bougie. Gentle but continued traction caused it to double up at the point grasped, and it was withdrawn without any laceration of the urethra. This case illustrates the readiness with which the female urethra may be dilated, for the purpose of removing calculi or in operations for vesico-vaginal fistula.—*Eclectic Med. Journal*.

Materia Medica.

ERYNGIUM AQUATICUM.

BY L. S. MORGAN, M. D.

The *Eryngium* plant I found on the prairies of Kansas in 1856. It was new to me, but while making my examination of its botanical character, I was attracted by its sensible properties of odor and taste to regard it as a medicinal agent of valuable remedial powers, and said, "If Hahnemann's law of 'similis' is correct, this will prove of much efficiency in catarrhal and laryngeal affections." I put a specimen of the plant for analysis with my botanical collection, and some of the root. On my return to New York I found my specimens wanting. They were left at Wyandotte City. I, however, prepared a tincture of the root, *secundum artum*, and labeling it "Kansas," let it have place with my medicines. Time passed, and my tincture was forgotten until January, 1858. There was an epidemic influenza through the southern part of Erie county, New York, where I then resided. I awoke in the night with its grapple in my throat, and experienced a set of symptoms that to me were entirely new in the history of personal ills. I remembered my Kansas medicine, and concluded to make a clinical experiment. I began with ten drops of the prime tincture to two ounces of water, taking it in teaspoonful doses at intervals of fifteen and twenty minutes, until the smarting, aching, and other abnormal sensations were relieved. There was a manifest influence, "but one swallow does not make a summer." There must be more evidence of the efficiency of the remedy. To be brief, I made such clinical provings of the remedy as to satisfy me of its potency and reliability in laryngeal irritations and affections of the mucous surfaces generally. In the short, hacking cough which followed that epidemic in many subjects, I found it to operate like a charm. In fact, many applications were made for "more of the cough remedy." "I have not been so free from cough, and slept so quietly o' nights for a long time," was the expression of many who were subjects of chronic laryngeal affections. I

have used it ever since as one of my most reliable remedies in that direction.

I may here state that a burglar entered my house, and among other things done my pocket was rifled of its contents, among which my note book, which contained elementary notes on *Eryngium* and other remedies, was taken, and my memoranda have not been renewed since. I will, however, state that I have used the *Eryngium* in mucous diarrhoea of children, with great success. In leucorrhoea and gonorrhoea it has a specific influence. It certainly does act on the *virile force*, suppressing it, as several instances have proved to my satisfaction of it over *excessive eraticus priapisms*.

Dr. Bradley, Eclectic, of Roseville, Illinois, informed me that Dr. ———, of Springfield, Illinois, a physician educated at Yale College, made great use of it in the bite of rattlesnake; he used this infusion until it produced effects on the stomach and bowels—a nausea and retching, and inclination to stool.

I will here remark that I have used the prime tincture, and the first decimal, and the third decimal attenuation with benefit—ordinarily the third attenuation. I commend the remedy to the attention of the homœopathic world. It ought to have a thorough and extensive proving.

I did not intend writing so much on this article, and I have not time to condense and abridge it; but in looking over what I have written I will only add, that on my return West in 1860 I found my Kansas plant growing in abundance on the prairies of Illinois, in Warren county, and the "oldest inhabitants" said it was called by the Indians "snakeweed," and that it was used by them for the rattlesnake poison. On analysis of its descriptive botanical characteristics, I found my Kansas plant to be the *Eryngium aquaticum*, as described by Eaton.

ACTION OF DIGITALINE.

Digitaline in Diseases of the Lungs.

The utility of digitaline in the treatment of affections of the heart is well-known. It produces relaxation of the pulse by slackening the circulation of the blood. Opinions differ as to the influence it may exert upon

the urinary secretion. Dr, Stadion, of Kiero, publishes on this subject numerous observations and experiments he has made upon himself, the general result of which he gives under the form of propositions, I will transcribe :

1. Digitaline produces in the physiological organism a diminution of the quantity of liquid secreted by the kidneys.

2. It brings on a diminution of the main constituting parts of urine, such as urea, chlorate of soda, phosphates and sulphates.

3. Uric acid alone is increased in quantity, but the degree of acidity of the urine remains the same.

4. The specific weight of the urine is decreased.

5. Digitaline at first increases the frequency of the pulse, then produces a diminution in the number of the contractions of the heart.

6. The rapid wasting and the slackening of nutrition which follow the administration of digitaline are two imperfect facts which show us the action and the mode of administering this remedy.

7. Digitaline acts like digitalis upon the circulatory, nervous and muscular systems, as well as upon the organs of generation.

8. It exercises an energetic influence upon the latter organs by depressing them, and it may momentarily arrest entirely the activity of the sexual system; it should, therefore be placed foremost among the antaphrodisiacal agents.

9. Its action upon the intestinal tube and the digestive organs is weaker than that of digitalis.

10. A particular affection of the mucous lining of the nose declaring itself under the form of a violent coryza seems to constitute a characteristic symptom during the employment of digitaline.

11. The strength of the action of digitaline compared with that of the plant, may be in the relation of thirty to one.

12. The dose of the remedy should not usually be over one-fifth of a grain per day. In most cases, especially in chronic affections, a twentieth to a sixth of a grain per day is sufficient for producing sensible effects.—

Medical and Surgical Reporter.

Societies.

ONONDAGA COUNTY (N. Y.) HOMŒOPATHIC MEDICAL SOCIETY.

The regular semi-annual meeting of this Society, adjourned from October 18th, 1864, was held at Syracuse 27th October, 1864, 10 o'clock a m,

The President, Dr. Wm. A. Hawley, called to order.

Present—Drs. W. H. Hoyt, J. G. Bigelow, L. Clary, Theodore Y. Kinne, A. R. Morgan, H. V. Miller, H. C. Hubbard, J. W. Sheldon and R. D. Rhoades. Also present as Delegates from other counties, Drs. L. B. Wells, J. C. Raymond and G. B. Palmer, of Oneida; Drs. T. Dwight Stow and Chafee, of Oswego, and Dr. Fellows, of Cayuga.

Minutes of last meeting read and approved.

On motion the regular order of business was suspended in order to take up communications.

A communication was received from Dr. W. Warren, of Oneida, containing a report entitled, "An accidental proving of *phytolacca decandra*."

Dr. J. C. Raymond, of Utica, furnished the report of a case of congestion on the brain, with paralysis and death.

A communication from Dr. Caulkins, of Cayuga County, was read, giving his experience in medical practice before adopting Homœopathy, and also his personal observations of medical practice as it now exists in the army.

Dr. O. W. Boyce, of Auburn, furnished an important article entitled, "Some of the uses of *Spigelia*."

The latter paper called out remarks from several of the members, who related their experience with *Spigelia*.

Dr. Stow, of Fulton, gave the details of a very beautiful cure of a case of chronic opthalma with severe neuralgic pain and partial opacity of the cornea, which, after resisting for several weeks, the treatment by the ordinary remedies, yielded promptly, in one or two days, to *Spigelia*.

On motion of Dr. Hoyt, the following preamble and resolutions were adopted :

Whereas, It has been repeatedly stated by opponents of our school, that several of the Life Insurance Companies decline appointing, as medical examiners, physicians who are engaged in the practice of Homœopathy, and

Whereas, Said report is derogatory to the dignity, honor and ability of a large and influential body of intelligent men; therefore, be it

Resolved, That a committee be appointed to confer with any such Life Insurance Companies doing business in the State of New York, for the purpose of ascertaining the truth or falsity of said statement.

Resolved, That silence in regard to the above query, upon the part of any of the interrogated Companies shall be deemed as presumptive evidence of the truth of said report, so far as each delinquent is concerned.

Resolved, That said committee be and hereby are instructed to report results of said correspondence to the New York State Homoeopathic Medical Society, at their next annual meeting February, 1865, for their consideration and action.

Dr. Wm. A. Hawley was, on motion of Dr. Hoyt, appointed said committee.

Adjourned until two o'clock.

AFTERNOON SESSION.

A communication was received from Prof. Carroll Dunham, announcing the forthcoming work on *Materia Medica*, and urging upon the members of this Society immediate co-operation by sending their subscriptions to the author, 112 North-Twelfth st., Philadelphia.

Drs. Dunham, P. P. Wells and B. Fincke have been appointed a special committee to revise the German text into English.

Dr. Morgan moved the following resolutions:

Resolved, That while we hail with satisfaction the announcement that a new *Materia Medica*, by that most competent Homoeopathist, Constantine Herring, M. D., is nearly ready for the press, we regard the proposition to print the same twice, or English and German "in opposite columns," with regret, deeming it undesirable and inexpedient, inasmuch as it involves an enormous increase in the cost, and will result in an unwieldy and cumbersome work, thus necessarily retarding its sale and limiting its usefulness.

Resolved, That we have entire confidence in the faithfulness of the Executive Council of the Homoeopathic Publication Society, organized at Philadelphia June 1st, 1864, under whose supervision the work is to be done, and in their ability to give us accurate translations of German provings, and that the English language is good enough for us.

Adopted.

Dr. Bigelow moved that a contribution of one dollar be solicited from each member to defray the expenses of the Society.

Adopted.

The following resolutions were then moved and adopted:

Resolved, That we are in favor of a re-organization of *The American Institute of Homoeopathy*, so as to make it a delegated body, representing State and County Societies.

Resolved, That at the next session of said American Institute, all members of the Onondaga County Homoeopathic Medical Society, who are now members of the former body, be instructed to use their influence in conformity with the above resolution.

E. D. Leonard, M. D., was elected a member of the Society.

The following gentlemen were elected honorary members of the Society: Drs. Wells, Raymond, Palmer, Chafee, Stow and Fellows.

Dr. Morgan made a general report on the Homoeopathic Theory and Practice.

Dr. Schenck read a novel and interesting report describing a case of "incongruous twinning," one child being born forty-five days after the other—both now living.

Dr. Sheldon also made a detailed report corroborating the above report of Dr. Schenck.

The above anomalous case elicited some discussion and much speculation without satisfactory result.

Dr. Hubbard read a remarkable proving upon himself of electro-magnetism.

Dr. Hoyt read a report on diseases of children; also, a report of a case of poisoning by *red sulphur*.

Dr. Stow gave an account of several important and interesting clinical cases from practice, which drew forth an animated discussion.

Dr. Wells, of Utica, read an able report on potencies, which elicited remarks from several members, highly commendatory of the high attenuations.

Dr. Palmer presented an instructive paper describing a clinical case from his own practice.

Prof. Carroll Dunham forwarded a paper entitled "Pathognomonic Symptoms and Characteristic Symptoms," in which he maintained with his accustomed ability, the position that pathological distinctions were inferior to characteristic symptoms, as a guide in Therapeutics.

The President here read a well digested, original essay on the alternation of remedies—assuming that the question was not yet settled.

On motion of Dr. Clary, the Secretary was appointed a Committee on Publication.

The following members were duly appointed delegates to other County Societies, viz:

Delegates to Onondaga County—Drs. Clary and Bigelow.

Delegates to Oswego County—Drs. Morgan and Miller.

Delegates to Cayuga County—Drs. Hawley and Hoyt.

Delegates to Wayne County—Drs. Kinne and Sheldon.

The thanks of the Society were extended to those gentlemen from other localities who had kindly favored us with their presence and their valuable communications.

The Society then adjourned to meet at Syracuse on the first Tuesday in May, 1865, at 10 o'clock A. M.

A. B. MORGAN, Secretary.

HOMOEOPATHIC MEDICAL SOCIETY OF ONEIDA COUNTY, N. Y.

The eighth annual meeting of this Society was held at Bagg's Hotel, in the city of Utica, Tuesday, October 18, 1864.

Meeting called to order at 12 m. Dr. L. Waldo in the chair.

On calling the roll the following members responded to their names: Drs. J. O. Raymond, L. B. Wells, J. A. Paine, E. A. Munger, H. M. Paine, W. Warren, M. M. Gardner, G. W. Bailey, G. B. Palmer, L. B. Waldo, W. B. Stebbins, J. W. Mower, W. Landt.

The following gentlemen were also present: Drs. A. R. Morgan, A. J. Bigelow, W. H. Hoyt, of Syracuse, and M. E. Boynton, of Clinton.

On motion of Dr. Wells, the delegates from the Onondaga County Homoeopathic Medical Society present were elected honorary members.

The President appointed Drs. Wm. B. Stebbins, L. B. Wells and M. M. Gardner a committee to nominate officers for the ensuing year.

Reports from committees on medical topics were then presented.

Dr. E. A. Munger presented a brief verbal report on epidemics in Oneida county.

Dr. G. B. Bailey presented a report on drug proving, consisting chiefly of trials of *Baptisia* by Dr. Hadley, of Boonville.

Extended remarks were made by Drs. Munger, Wells and Palmer, respecting the utility of *Baptisia* in fevers and lung diseases.

Several interesting clinical cases were related by a number of the gentlemen present.

On motion of Dr. Munger, the usual order of business was suspended for the purpose of listening to the report of the Treasurer, which was presented and adopted.

The Nominating Committee presented the names of the following gentlemen as officers of the Society for the ensuing year, who were unanimously elected:

Dr. Hiram Hadley, of Boonville, President.

Dr. O. S. Scudder, of Rome, Vice President.

Dr. M. M. Gardner, of Holland Patent, Secretary and Treasurer.

Censors—Drs. D. D. Joslin, G. B. Palmer, A. Gulwits and W. H. Watson.

Committee on Publication—W. H. Watson, L. B. Wells.

Delegates to the State Homoeopathic Medical Society—Drs. M. M. Gardner, W. B. Stebbins, W. H. Watson, and J. O. Raymond.

Delegates to the Cayuga County Homoeopathic Medical Society—Drs. E. A. Munger, L. B. Waldo.

Delegates to the Wayne County Homoeopathic Medical Society—Dr. H. M. Paine.

Delegates to the Otsego County Homoeopathic Medical Society—Dr. N. Spencer.

Delegates to the Onondaga County Homoeopathic Medical Society—Drs. L. B. Wells, H. M. Paine and G. B. Palmer.

Dr. Munger urged the importance of appointing committees to secure the formation of Homoeopathic Medical Societies in adjacent counties.

In compliance the President appointed the following committees: Drs. Stebbins, Landt and Mower for Herkimer County; Drs. Munger and Palmer for Madison and Chenango counties; Drs. Waldo and Joslin, for Jefferson County.

Dr. Munger offered the following resolution, which was adopted:

Resolved, That the thanks of this Society be tendered to Dr. H. M. Paine, for his efficient services as Secretary and Treasurer during the past six years.

The Society adjourned half an hour.

AFTERNOON SESSION.

Dr. Wells presented the following resolutions, which were adopted:

Resolved, As the sentiment of this Society that the American Institute of Homoeopathy should be re-organized on the basis of representation from the several State and County Medical Societies in this country.

Resolved, That members of this Society who are members of the American Institute, and who may be present at its next meeting, be requested to act as representatives of this Association.

Dr. Raymond presented an account of congestion on the brain with paralysis.

Dr. Wm. H. Hoyt, of Syracuse, read a communication by Dr. Boyce, entitled, "Indications for the administration of *Spigelia*."

Dr. A. R. Morgan, of Syracuse, presented a written communication giving in detail a clinical case from practice.

On motion of Dr. Munger, the thanks of the Society were extended to Drs. Morgan and Hoyt for their interesting papers, and copies were requested for publication with the proceedings of this meeting.

Dr. Warren presented a paper entitled "A case of accidental poisoning by *pyrolacca decandra*."

The Secretary read a letter from Prof. Dunham, urging the members to aid the publication of the forthcoming work on *Materia Medica*, by sending their subscriptions to the author, Dr. C. Hering, 112 North-Twelfth street, Philadelphia.

Dr. L. B. Waldo made a verbal statement respecting his experience in the treatment

of epidemic dysentery, recently prevalent in Jefferson county.

Dr. H. M. Paine presented a report entitled, "Nosological Classification of Disease. Monthly summary of Prevailing Diseases, in connection with a similar Summary of Meteorological Observations during the year 1862." By Drs. William H. Watson, of Utica, and Horace M. Paine, of Clinton.

We quote from the introductory remarks as follows:

"By classifying diseases, and recording the causes of death, the most valuable information is obtained relative to the health of the people, or of the pestilential agencies which surround them. We can take this or that disease and measure, not its destructiveness, but its favorite times of visitation. We can identify its favorite localities, and classify its victims. We are able to trace diseases also as they perceptibly get weaker and weaker, as some have done of late. We know, from the valuable returns of the Registrar General of England, prepared by Dr. Farr, that scarlatina is, or rather was, decreasing, and that it has been growing less and less destructive since 1851; that, until quite lately, the whooping cough has likewise declined, in some measure, and that measles alone, out of these severe diseases, has exhibited any tendency to increase. The advantages, therefore, of adopting some system of classifying diseases, which can be put to such useful purposes, must be obvious to every one. It is proposed to adopt some system which, while it meets the requirements of science, will illustrate, by its use, the practical questions of the day, relative to diseases, and their bearing upon the public health; and which will show those causes which are injurious or fatal to the life of man, and so contribute to their removal.

"It is not probable that the importance of a correct nosological classification will be overestimated. Without it the uniform and accurate registration of prevailing diseases, and the causes of death, cannot be secured. It is the first step in this department of medical research."

The report will doubtless prove a useful guide in the daily registration of prevailing diseases, and as it is to be published in the Transactions of the State Homœopathic Medical Society, will soon be ready for general distribution to the profession throughout the State.

The Society then adjourned to meet at Little Falls on the third Tuesday in June, 1865.

Miscellany.

THE HOME FOR INDIGENT AND INCURABLE CONSUMPTIVES.

A hospital for the gratuitous medical treatment and tender care of cases of confirmed consumption, in homeless persons, and those too poor to provide for themselves, has lately been opened at No. 4 Vernon street, in this city.

The design originated in a simple desire to help and comfort a class of sufferers whose necessities and distresses have hitherto found no institution among us especially adapted to their relief; and thus to honor at once our common humanity and our blessed Redeemer. This institution has been founded without patronage or funds, in an humble but confident reliance on the God of mercy, and on the benevolence of his children; in the faith that Christ, so gracious to the sick and needy when he was on earth, would move the hearts and open the hands of his people to carry the work forward. Nor has this confidence been disappointed. A house has been obtained, and for the most part furnished, and attendants have been procured. Ever since the enterprise became informally known to the public, in August, a steady stream of free-offerings has flowed in upon it, gathered from widely different sources. To sustain the undertaking, it is plain that gifts must be constantly coming in. The founder, a Homœopathic physician, proposes to give his time, professional services, superintendence, and property. Bedding, bed-clothing, garments for invalids, articles of food of all kinds, both for patients and nurses; groceries, meats and fruits, cordials and jellies, fuel, and a considerable amount of money from week to week, will be required. This substantial assistance is sought in the name of helpless sufferers, and in the name of the Lord Jesus. It is believed that there are many in this community who will consider it a privilege to contribute to a charity conducted on this principle. Whatever is offered will be expended or used with economy and care. The Hospital is open to the inspection of all its friends. No distinction as to age, sex, nationality, or religion will be made in admitting or treating inmates. Everything that is possible will be done to soothe pain, to sustain the spirits, and to console the last hours of those appointed to die.

Further information may be had from Dr. Charles Cullis, No. 21 Bowdoin street, between the hours of 2 and 4 p. m.; or at the hospital, on Vernon street, during the hour of 9 to 10 in the morning.

Reference is made to Rev. F. D. Huntington, D. D., Rev. E. N. Kirk, D. D., Rev. Wm. Hague, D. D., Rev. S. K. Lothrop, D. D., Rev. A. A. Miner; D. D., Hon. Alexander H. Rice; Hon. Jacob Sleeper; E. S. Tobey, Esq.

"I have showed you all things, how that so laboring ye ought to support the weak, and to remember the words of the Lord Jesus, how he said, It is more blessed to give than to receive."—Acts 20: 35.

"He that has pity upon the poor, lendeth unto the Lord; and that which he hath given will he pay him again."—Prov. 19: 17.

"Blessed is he that considereth the poor: the Lord will deliver him in time of trouble. Psalm 41: 1.—*From circular issued in Boston.*

THE CONSUMPTIVE CURERS OF NEW YORK.

BY AN INVALID M. D.

[After some preliminary remarks "Invalid" proceeds to say] I directed my footsteps to the great city of New York. I have a large cavity in the upper part of the left lung, and I have been told with a sad voice and a firm aspect, by one whom I loved and had every reason to respect, that softening had already begun in the apex of the opposite organ; and I am emaciated to the last degree. Nevertheless, from the glowing accounts which I had heard of the wonderful power over the disease, possessed by numberless men in this great commercial emporium of our Union, I resolved to proceed thither at all hazards.

My mind was filled with vague, but most embarrassing hopes; shadowy outlines of superhuman skill, in men, high above their fellows in point of pure humanity and disinterested devotion to the science of life, flitted before my morbid vision, giving me strength to endure the journey.

Two great parties I found engaged with equal zeal in this important work. The one I shall describe as the constitutional class, or those who adopt a general treatment; the other the local, or those who adopt a strictly topical method of cure. I had been educated in the former school, and did not tarry long with its professors.

Improve the nutrition,—cod liver oil—good diet—much out door exercise, measures which I knew had saved me so far, were all they could tell me about, but knowing all this before, I was not satisfied, and wished to go further; for these I found were not the men who were doing so many wonders. I diverged a little into the intermediate class—a sort of divining doctor, by spiritual agency—who had an immense run, as I learned, among the clergy. The Dr. was overrun with patients—his ante-room was

like the lobby of a theatre on the night of a popular actor's benefit.

I took my seat, and abiding my turn, it came at last. I found behind the scenes one having the air of "a most prosperous gentleman," who looked through my case with an imposing flourish—smiled approvingly—received a fee,—I thought an enormous one,—and bade me follow him and it would be well. Conducting me back into the ante-room, he sang out some words in an unknown tongue to a clerk near the window, who wore a remarkably stiff, standing shirt collar, and then, with a graceful wave of the hand, withdrew. This latter person at once handed me a package of medicine, already neatly put up in a handsome paper box. Ah, said I in surprise, did you have it ready? Yes, said the clerk, carelessly, I saw you come in, and whilst you were waiting to see the Boss, I put it up. Then, rejoined I with warmth, you knew beforehand what he intended to give me.

The clerk with a stiff standing collar, thrust his tongue into his left cheek, drew the lower lid of his right eye grimly down with his right finger, leered at me significantly, but with much good-nature, and I departed, I think a wiser man.

After visiting a man who had told that he had enjoyed the honor (hitherto unknown to Americans) of being the physician for many years to her majesty Victoria, Queen of England, and that he had a book which he sold for 12½ cents, which would tell me how to cure myself of any disease as well as he could; and which I did not but for reasons which must be obvious, I became disgusted with this whole class, and having no other alternative, threw myself into the arms of a Topical party, with hope still undiminished.

But in this there was some difficulty, for I found two parties, and which to select perplexed me some. The one I shall characterize as the *Probangers*, the other the *Inhalers*. From which I learned the history of these parties is possessed of no little interest.

It appears that the Probang, and its accompanying sponge and caustic, were not originally used to cure consumption. In simple throat affections, however, it had had an immense run. Clergymen everywhere had tried it, and such of their flocks as they could influence had followed suit, and the whole thing became rapidly much in vogue.

Finding how easily it went down the throats of the people, it by and by took a bolder stand, and stoutly proclaimed its power to cure consumption in its most common form. Still, it must be remembered, in all this time it never claimed to go beyond bifurcation. But we all remember how popular it was, and what vast sums of money it must have made.

Whether it was the latter, which is a great stimulus to invention, or some higher motive, it is certain that this thing did not pass unnoticed. Active minds were at work, and vigorous intellects became engaged in tapping this rich mine, and in pushing further the investigation. As the result of all this, inhalation turned up. The probangers were taken on their own ground—the people were told that if topical treatment, so partially applied, was successful, how much more were they entitled to expect from a method making the whole lung accessible to medicinal agents. The reasoning was plausible—the thing took—Probangdom tottered to its very base, and inhalation became the rage.

But our friends were not to be put down in this manner; they were penetrating men, and at once saw that all they had to do was to go a little deeper. The old idea of the bifurcation being the limit of the probang was therefore abandoned, and it was proclaimed that cavities could be invaded and sponged out, and that inhalation could not dare do more than it.

This was the state of things at the time of my visit, and it was this which led to my perplexity already spoken of.

But as I had already (as every body else almost has done in my situation) used the probang, as far as the bifurcation, as it was said to have been applied, I at length decided upon inhalation, and repaired without delay to its head-quarters in the city. The Doctor received and examined my case with exceeding care. At home, my medical friends could perceive at a glance, as they told me, by the flattening of the left side of the chest, and its quiescence during respiration, the nature of my disease, but these signs were not sufficient for my new adviser.

He stripped me to the skin, measured, percussed, and auscultated, over and over again every part. I never saw so much pains, and would have thought some of his manipulations indicative of decided "greenness," but for the exalted reputation and obviously large experience of the operator. He found my case a very beautiful one—I was, he said, just enough diseased to test the full power of his method. In the course of his remarks, however, it turned up that this person was not the genuine man so widely known, and I dressed myself with some show of indignation. He took my complaints very quietly, and showed me into the next room. The person who there received me won my heart. He showed me around, examined my case, predicted "a good time coming" for me soon, but in the midst of it he announced himself as only an assistant, and appeared greatly surprised that I should know anything of that. I stamped in rage, and announced that I had come all the way

from Virginia just to see the genuine article, and would not be satisfied with any substitute. This gained me admission into the great man's presence. I found him superb. My account of my reception amused him much, and we became unreserved and quite intimate.

The fact was, he told me, that these fellows had come well recommended to him,—the business had prospered in their hands—he was no judge of qualification—didn't pretend to it—had seen an opening for it, had got the business up, and managed only the advertising and money department. In short, said he, I am only the capitalist of the concern. The little fellow you first saw, he furthermore proceeded, is, I think myself, a little too fussy over the chest, but the other one, I do think, is nice for the throat.

I had one other chance, which was to have my cavity sponged out. The Doctor told me my case was a beautiful one for the treatment. I admired his ingenious arguments in favor of his method, and was quite carried away by his charming description of the *reticels* of the whole operation. When the finished, I announced, with enthusiasm that I was a convert to his views, and pronounced myself ready at any moment for the operation. He examined me again with greater care, and with a faint touch more of gravity in his countenance. It was just the thing for my case, said he, and would have to be done, but not then. You get back home, he proceeded, and get a little more strength, and then return, and I'll perform the operation for you.

One hour afterwards, feeling as a doomed man, I left the great city of New York. The consumption curers have taken from me all my bright hopes, and left me but a mockery.—*Virg. Med. Surv. Jour.*—*Chicago Med. Journal.*

PROCEEDINGS OF THE BROOME COUNTY (N.Y.) MEDICAL SOCIETY.

The annual meeting of the Society assembled at the office of Dr. Griswold, on the 11th instant, at 1 p. m., and was called to order by the Vice President, Dr. William Bassett.

Drs. Griswold, Crafts, and Brooks were appointed Committee on Credentials. They reported the names of Dr. S. H. French, 2d, of Lisle; Drs. Carlton, R. Heaton, of Maine; Dr. Gregory Doyle, of Binghamton, and Dr. Samuel B. Foster, of Vestal, as eligible for membership.

They were, by a vote of the Society, elected members.

The Treasurer's report was offered by Dr. J. G. Orton, and on motion, approved by the Society.

Dr. Orton presented a patient suffering under chronic Hydrocephalus; the case was examined by the members and discussed in consultation.

The election of officers being next in order resulted as follows:

President—Dr. Wm. Bassett.

Vice President—Dr. S. H. French.

Secretary—Dr. J. G. Orton.

Treasurer—Dr. E. G. Crafts.

Censors—Drs. J. G. Orton, E. G. Crafts, William Bassett, P. B. Brooks and W. S. Griswold.

Delegate to State Medical Society—Dr. W. S. Griswold.

Substitute—Dr. E. G. Crafts.

Delegates to the American Medical Association—Drs. C. R. Heston, and Wm. Bassett.

EVENING SESSION—7 O'CLOCK

Dr. H. P. Brooks presented a paper on Strumous diseases of the alimentary canal—their symptoms and pathological indications.

Dr. E. I. Ford, U. S. A., was elected President *pro tem*, and gave the Society some interesting facts connected with the treatment of diseases peculiar to hospital practice in Nashville, Tennessee.

The case presented by Dr. Orton was taken up and discussed by all of the members present.

The following preamble and resolutions were unanimously adopted:

Whereas, By enactments of the Legislature of this State, the County Medical Societies, as auxiliary to the State Society, are made the legal representatives and guardians of the interests of the regular medical profession of their localities; therefore,

Resolved, That it is the duty of every regular practitioner of Medicine and Surgery in this county, (as distinguished from the various followers of Quackery, as Homoeopathy, Hydropathy, Eclecticism, &c.,) to become a member of this Society and to participate in its proceedings.

Resolved, That notice is hereby given that every regular practitioner of Medicine and Surgery in this county must present himself or forward his credentials to the Secretary during the next Semi-Annual meeting to be held in this place on the 8th day of November, 1865, and in fault of fulfilling this obligation shall forfeit all claims to professional recognition.

Resolved, That a correct list of members of this Society shall be published in connection with the proceedings of its meetings.

Adjourned.

J. G. ORTON, Secretary.

—*Binghamton Daily Republican*.

See the following suggestion to the farmers of Broome County.

A SUGGESTION TO THE FARMERS OF BROOME COUNTY.

It is thought best by a few of the Regular Farmers, who are opposed to the improvements in farming implements, and the better methods of cultivating the soil, that at their next annual meeting, they adopt the following preamble and resolutions:

Whereas, By enactment of the Legislature of this State, the County Farmer's Societies as auxiliary of the State Society, are made the legal representatives and guardians of the Regular Farming interests of their localities, Therefore,

Resolved, That it is the duty of every Regular Farmer, (as distinguished from the various followers of new improvements in farming, and who dare to use a new Mowing Machine, &c.,) to become a member of our Society, and do all he can to prevent reforms in agriculture so detrimental to our interests.

Resolved, That notice is hereby given, that every Regular Farmer in the County must present himself or forward his opinions of said injurious improvements, to the Secretary before the next meeting, and in default of fulfilling this obligation, shall forfeit all claims of having any knowledge of farming, or be recognized by us as having authority to decide agricultural questions.

Resolved, That unless the above resolutions are adopted by the Society, we fear our produce will not sell, and our old plows or scythes cannot be used with as much dignity and effect as formerly. Even now we very unwillingly acknowledge that the good people have as greatly fallen into Quackery in farming as in Medicine. We have long felt that something must be done to arrest such reforms.

Resolved, That we believe by shutting our eyes and ears, and refusing to recognize such Farming Quacks, the public will be induced to leave them, and still sustain us in the legal use of our old implements.

By order of the Sec'y. GAY JONES.

HOMOEOPATHIC MEDICAL SOCIETY FOR THE STATE OF OHIO.

At a convention of the Homoeopaths of Ohio held at Columbus, O., Oct. 12, 1864, a permanent organization was effected and the following officers appointed:

President—Prof. A. O. Blair.

First Vice-President—Dr. E. C. Withersell.

Second Vice-President—Dr. W. Webster.

Secretary—Dr. C. Cropper.

Treasurer—Dr. C. C. White.

Censors—Drs. A. Shepherd, G. H. Blair, C. Osterlin, T. P. Wilson, Lewis Barnes, T. M. Miller and E. C. Beckwith.

If we had received a report of the proceedings we should have been pleased to have printed it in full.

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[A MONTHLY JOURNAL,

DEVOTED TO THE INTERESTS OF

HOMŒOPATHIC PHYSICIANS.

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EDWIN A. LODGE, M. D., EDITOR.

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AMERICAN HOMŒOPATHIC OBSERVER.

Vol. II.

JANUARY, 1865.

No. 1

Materia Medica.

BOLETUS (Pinus?)

BY R. M. HALE, M. D., CHICAGO.

It is the object of this brief notice to call the attention of the profession to a species of boletus not mentioned in any medical work with which I am acquainted. In the United States Dispensatory will be found a notice of the different varieties of boletus, under the head of "Agaric," (common names, "touchwood," "spunk," "tinder.") "This is the product of different species of a genus of mushrooms denominated boletus. Several specimens of this genus are used as food, several are poisonous, and two, at least, have been ranked among official medicines in Europe. The boletus laricis, which grows upon the Larch of the Old World, is the white agaric, or purging agaric of medical writers. It is of various sizes, from that of the fist to that of a child's head, or even larger, hard and spongy; externally brown or reddish, but as found in commerce is deprived of its exterior coat, and consists of a light, white, spongy, somewhat farinaceous friable mass, which, though being capable of being rubbed into powder upon a sieve, is not easily pulverized in the ordinary mode, as it flattens under the pestle. It has a sweetish, very bitter taste, and consists, according to Braconnet, of seventy-two parts of resinous matter, two of bitter extractive, and twenty-six of fungin, a nutritious animalized principle, constituting the base of the fleshy substance of mushrooms. It contains also benzoic acid, and various saline compounds. In the dose of four or six grains it is said to act powerfully as a cathartic, but Lieutaud asserts that it may be given in the quantity of thirty grains, or a drachm, without

purging. M. Andral has found it useful in checking the night sweats of phthisis. He uses it in doses of eight grains, and gradually increases to a drachm during the day, without any observable inconvenience to the digestive functions."

I have quoted this description in full because it very closely corresponds with that of the specimen I have in my possession, and which is said to be found upon the pine trees in Northern Michigan. It has a *sweetish* but *intensely bitter* taste, and is of the consistence of the *boletus laricis*, but it is *brown interiorly*. From the fact that the Larch and Pine have some considerable botanical affinity, as well as similar medicinal virtues, we cannot go far wrong in assigning to the *boletus pinus*, (if so it may be called,) similar virtues to those of the *B. Larices*.

This species was sent me with the recommendation that it was considered, in the locality of its *habitat*, as a specific for "ague." I have used it in three cases of tertian intermittents, two of which were arrested under its use, but came on again in fourteen days. The third case did not seem to be influenced by its action. No pathogenetic symptoms were noticed by the patients. It was given in the form of *tincture*; ten drops of the first decimal dilution, every two hours.

The writer desires that physicians who reside in the localities where the *boletus* is found, will assist in collecting some data upon which to base a correct knowledge of the fungus. The following plan is suggested as the most proper:

1. To ascertain what species of pine the *boletus* selects as its place of growth.
2. To collect perfect specimens and send them to Dr. Lodge, who will have them analyzed and prepare tinctures for the purpose of proving.
3. To collect from all sources any facts relative to its *curative* or *pathogenetic* effects, and send such information to Dr. Lodge, or the writer.

It is the impression of some physicians that this fungus deserves a thorough proving, and that valuable curative properties may be discovered in it. Dr. Burt and others offer to prove it on themselves.

There are several other varieties of *boletus*, which undoubtedly possess medicinal virtues, namely: *B. ignarius*, (or *agaric* of the oak,) *B. unguatus*, *B. fomentarius*, *B. ribis*, etc. The first named is well known by its resemblance to

a horse's hoof. It contains resin, chloride of potassium, and sulphate of lime; in its ashes are found iron, and phosphate of lime, and magnesia. This, also, should be proven. Any clinical facts relating to this variety should be made public through our journals.

The *Agaricus muscarius* so highly valued by our school, and so useful in many nervous and other diseases, is a species of mushroom, having some general affinities with the genus *boletus*.

ACONITE, PHOSPHORUS, ARSENICUM AND SULPHUR.

A COMPARISON,—BY HENRY H. MARTIN, BUFFALO, N. Y.*

GENTLEMEN: In this lecture, I shall endeavor to individualize the remedies treated of, having in view the object of finding out, if possible, the genius of each. In order to do this understandingly, I propose to make a comparison between Aconite, Phosphorus, Arsenicum and Sulphur, giving first the characteristic person representing each of these remedies, both in a state of health and disease.

By this method, if we once get firmly impressed upon our minds the personality of a drug, we may always, with considerable certainty, recognize it, just as we recognize a familiar face, even in the distance, and before he has approached so near to us as to permit the delineation of the minutia of his features. How do we recognize him in the distance? It is by his peculiar gait, the style and color of his clothes, the carriage of his head, the swing of his arms, in fact, his *tout ensemble*. We ought to become so well acquainted with the peculiarities, the genius of a drug, or its representative in disease, that to see the sick person is to know the remedy—which is its counterpart—even before we have inquired into the minutia of the symptoms. Its impress upon the person gives the expression of the remedy, if we are only well enough acquainted with its genius to recognise it.

You will permit me to use the plainest language, because to make a picture strong there must be lights and shades.

* Delivered before the Hahnemann Institute of Philadelphia, November 23d, 1864.

I therefore descend to the language of the most common life, at times, in order to give force to the characters which I shall delineate.

The healthy person which may fairly represent Aconite, is a plump, full habited, not very tall, enthusiastic girl, with auburn hair, nut brown eyes, and fair skin. The sanguineous temperament.

She is open-hearted and generous, sometimes malicious, especially in the affairs of love, she delights in teasing her beau. She is active and romping in her habits, blushes easily, and is exstasic in all her manifestations, whether in pursuit of a new hat or a new lover. She is neither haughty, indifferent, or mild in disposition. She takes a lively interest in everything which comes within her notice, is romantic, but not serious. Her mood is fitful, changing rapidly from mirthfulness to sadness, and then to mirthfulness again. Her diseases are either of an irritative, inflammatory, or congestive character. She is liable to sanguinous apoplexy, to diseases of the sensitive nerves, and congestive headaches—the pains being usually in the forehead and left side of the head. When sick she sometimes becomes whining, fretful and irritable, and sometimes sad.

A case of Aconite disease most commonly met with in practice, is as follows:—

You are called in great haste to see a patient whom you find having the following symptoms: She has oppressed, labored breathing, great and sudden weakness. She is irritable, whining and delirious; she sings, and laughs, and then weeps; her face is red, hot, and when not delirious she complains of great fulness and heaviness in the forehead, with a crampy sensation at the root of the nose. What is the cause of all this violent disturbance of the system? She tells you that while in a profuse perspiration she caught cold by sitting in a draft of air, or perhaps she got chilled by a cold north wind, which suppressed the insensible exhalations of the body. Now she attempts to sit up, and her face, which was red, turns deathly pale, and she faints away. She tosses about in bed, and she cannot lie on either side, especially on the left side. She complains that the room is too light, and becomes almost frantic at the least noise in the room. All the teeth on the left side, and the whole of the left side of face throbs and aches. Her mouth is dry and

the tongue is coated white. She is hoarse and croupy, and her throat is inflamed and painful when swallowing. She has fullness and pressure in the region of the liver. Her urine is scanty, bright red, and hot, *but it has no sediment in it*; she may also have drawing, tearing pain in the knees; she has great thirst, and complains that she is burning up with heat internally, but feels chilly externally, while to others the skin is hot and dry to the touch; she complains of a sensation of heat running down from her head and chills running up from her feet; she turns about and says the pains are insupportable; the pulse is fast, full and hard; there are no pulsations of the arteries of the neck; no tearing and clawing pains in the abdomen; no sediment in the urine, and you do not find her lying quietly on her back in a comatose condition. In the case before us, if the last named symptoms were present, Aconite would not be indicated.

The Phosphorus individual in a state of health is a smooth, polished gentleman, with black, glossy hair, brilliant black eyes, fine texture of skin, having a pinkish tinge or delicate, suffused blush of countenance. The capillaries are always well filled with blood, and the saying of Hahnemann, therefore, is necessarily true, that "small wounds bleed much." He has great fondness for the opposite sex, and he is a ladies' man; he is neither malicious, courageous, or mistrustful; he is fond of fine dress, and like the aconite girl goes into extacies over a new hat or a new lady acquaintance; he is a constant attendant at the theatre or billiard room, at parties and balls, and his spare moments are devoted to light literature, wine and women, and late suppers; he has a delicate constitution, moderate plumpness of form; small hands, with long, taper fingers, and oval, pinkish tinged finger nails; he is proud of his handsome hands, and therefore wears gloves to keep them soft and delicate. He has more suavity than haughtiness; likes to tell good stories, especially about the women; is buoyant in spirits, but irritable if you tease him, or tread on his favorite toes. He has no love for money except for the gratification of his desires.

You will observe that Phosphorus is the most polished and gentlemanly person in the whole Materia Medica. He makes the Sulphur man do errands for him, and pays him with a glass of beer, and perfectly abhors and detests the Arsenic man.

A well marked case of Phthisis Pulmonalis for which phosphorus is the remedy, has dizziness of the head, especially upon rising from bed in the morning; his head feels light; he has occasional pain in the forehead; his eyes are more brilliant than in health—we might say, almost phosphorescent—his intellect clear, finger nails longer and more hooked than in health, but not much thickened; he has *muscae volitantes* and fantastic illusions; his cough is hoarse and deep, and resembles a sound produced by coughing in a barrel. It is aggravated by cold air, especially from going out of a warm room into the cold air, and also from going into a warm room from the cold air. The sputa is either yellow or white—not very thick, if yellow; it is much thinner than the Pulsatilla expectoration, and it tastes either saltish or sweetish; he has stitching, cutting, darting pains through both lungs, but mostly through the left lung, in the mammary region; he cannot lie on his left side, because it aggravates his pain and cough. The skin remains clear, but he is much emaciated; his eyes are sunken, and the flush on the face, as the disease progresses, becomes more and more circumscribed. He becomes stoop-shouldered, and his lack of courage and true manliness in health makes him a sneak when he is sick; he eats late suppers and goes to bed at 10 o'clock, coughs until midnight, and then sleeps until morning; after getting out of bed, he hawks up large quantities of mucus; speaking or reading always aggravates his cough; he has either diarrhoea or small, hard stool, which is expelled with difficulty; brick dust sediment in the urine; cold feet and legs, especially cold from the ankles to the knees; he has hectic fever late in the afternoon or evening, with burning of the hands and face, followed by a viscid, sticky, night sweat; his chills are mostly internal, and run down the back, while the flashes of heat run up his back. The voice of a phosphorus person sounds soft, hoarse and deep when talking. Pulse is unusually quick and full.

We will now take a glance at the Arsenic man. He is the most miserly person in the Materia Medica. He is wonderfully different from phosphorus, and we shall presently see why arsenic and phosphorus never could be friends. They have even no chemical affinities with each other.

The Arsenic man in a state of health is tall, spare and austere. His features are wrinkled, dried and leathery, while

his hair and eyes are dark, and his hair is straight and harsh; everything about him is harsh; when he walks by you in the street, he walks fast, runs against you, and wants a great deal of elbow room; he is impolite, money making, covetous and malicious; he would rob his own brother for the sake of gain; he has no affection for the opposite sex, and if he marries he does so to obtain wealth; he is more attentive to his ledger than his wife. He is a very anxious man—he is so anxious to make money that he has no time to be a fashionable man, but studies his ledger instead of attending parties, balls, theatres, or the billiard room; he is not a daring man, and therefore does not take great risks in his business operations, but rather seeks wealth through miserly habits, and low, underhanded cunning and meanness; he is totally wanting in moral courage, and constantly fears death; he cherishes none of the finer feelings of human nature; unlike the aconite and phosphorus persons, he never thinks of fine clothes, and never goes into extacies over a new hat or a new acquaintance; he has no love for anything except self.

He is himself repulsive, and his diseases are of the repulsive kind, such as ulcers, cancers, etc. He loves a hot stove and warmth generally, and his diseases are of a burning and acrid character.

A case of Phthisis pulmonalis, for which Arsenic is the remedy, may be found in the following symptoms:

There is no dizziness of the head, as in Phosphorus, but occasional pain in the forehead. Finger nails are harsh, thick, rough, dark colored and hooked; he has no *muscae volitantes*, no fantastic illusions, or spots before the eyes; he sees nothing but plain matters of fact; he is much emaciated, eyes sunken, skin harsh and dry like a tanned hog's skin, and there is no circumscribed redness of the cheeks, as there is in phosphorus; he feels mean, and is mean; he has great fear of death; he coughs day and night, but does not expectorate except during the day; his cough is worse at night, especially after midnight. The sputa is acrid, sometimes bloody, filthy, gray, milky or yellow, and it tastes bitter, putrid and offensive, but more especially salty; it also smells offensive; his voice is harsh and hoarse. The most common pain is a dull, heavy, burning pain under the right shoulder blade; his expectoration commences after breakfast and he expectorates worse after every meal through the day; he has oppressed shortness of breath, expe-

cially when going up stairs, or when lying down, and after midnight; his cough is asthmatic; he has dry, burning skin of the hands and feet; he does not sleep well nights, for he has anxious tassing about and dreams of dead persons; sleeping or waking he fears death; he cannot sleep after midnight; he has chilliness in the afternoon, followed by dry evening heat and later, sweat; his pulse is small, fast and tremulous; he cannot lie on his right side, and is relieved by lying on his left side, just the reverse of phosphorus; he has to lie with his head high; all his symptoms are aggravated by cold air, cold weather, cold food or cold applications; he has great thirst, but has to drink sparingly; he does not like to be alone, for fear of death. There is scanty, burning, almost suppressed, urine, and brown offensive diarrhoea.

Phosphorus has stitches—arsenic has not.

Phosphorus is worse before midnight; arsenic is worse after midnight; arsenic has fetid stool; phosphorus has not; arsenic has swollen tongue; phosphorus has not.

✓ The Sulphur individual differs from either of the others. He is a stoop-shouldered person, and has a shuffling gait. He never looks you in the face, but looks as though he had just committed some act of which he was ashamed. He has no self-respect, is too lazy to work, is fond of beer and whisky and has great aversion to wine. His hair is uncombed, his eyes are red, his nose is habitually red and swollen and he looks as though he had kept the "wee sma' hours" in a grog shop. His clothes are ragged and out of fashion. His face and hands are dirty, and he continually scratches his head. He sits around a lager beer saloon until the lights are turned off, waiting for some one to treat him. He goes to bed late at night and would not get up at all in the morning but for his thirst for a glass of beer. He dislikes to wash himself. He is irritable and peevish in the morning and has no appetite for his breakfast. He is sleepy and stupid all day and dull of comprehension. At night, he lies on his back and has the nightmare. He has no desire for sexual intercourse, his penis is always cold, his genitals are nasty and stink. He never changes his shirt, but wears it out on his back.

As a sick man, his face is swollen, freckled and covered with pimples. He has pimples on his forehead. He has a patch of tetter across his nose and an eruption behind his ears. His eyes are red, inflamed and full of matter, and his nose

is dry. The edges of the eyelids are swollen red and itch. He has hardness of hearing, and a purulent discharge escapes from his ears. His breath is fetid, and he has no appetite. He has the itch, and his hands are dry and cracked and dirty; they are also cold and trembling. He feels worse in the open air, and has intolerable itching after getting warm in bed. He is continually chilly. Has loss of sexual power and an offensive perspiration of the genitals. He has phimosis with fetid pus dropping from it. His feet are cold and sweaty. He has rolling and rumbling in the bowels, loud eructations, sour vomiting and continual nausea at the stomach. He has itching, moist hemorrhoids, involuntary, painless, stinking mucus diarrhoea, or else painful and green or bloody stools. His urine is passed involuntarily, or with much difficulty, and in drops. He has organic disease of the heart, burning, sprained pains in the knee joints, a stiff neck and pain in the occiput. He has a morning cough with bloody expectoration which tastes like the discharge in a chronic catarrh. He has itching at the anus with ascarides, is full of fantastic illusions and sees a halo around a light.

Gentlemen—I have endeavored to draw a truthful picture of four individuals, who are so different from each other that no one ought ever to mistake one for the other. Neither of the last three would ever move in the same social circle with the other. The Arsenic business man and the Phosphorus gentleman of leisure having no traits in common, while the Sulphur loafer would always be ready and willing to beg at the hands of, or do the dirty work of either.

Aconite acts most prominently upon the left side of the body, with the exceptions of the right sexual organs and the right side nose.

Phosphorus acts most prominently upon the left side of the head, the right side of the face, the left side of the mouth and fauces, upon the right side of the abdomen, upon the left lung, the right upper and lower extremities, and upon the left inguinal rings.

Arsenic acts most prominently upon the left side of the head, the right side of the face, mouth and fauces, left hypochondria, the right side of the abdomen, the right inguinal rings, the right lung, and the right upper and lower extremities.

Sulphur acts most prominently upon the left side of the head and face, the left side of the mouth, teeth and fauces,

the left hypochondria, the left side of the abdomen, the left inguinal rings, the right sexual organs, the left side of the neck and nape of the neck, the left lung, the left side of the back, and the left upper and lower extremities.

Aconite has sanguineous apoplexy.

Phosphorus has nervous apoplexy.

Arsenic and Sulphur are not liable to either.

The aggravations of Aconite are in the night, especially about midnight; of Arsenic, after midnight; of Phosphorus, before midnight, and Sulphur, through the night.

Aconite has exstatis delirium; Arsenic has mumbling delirium, he thinks is going to be hung. Phosphorus has not much delirium, what there is, is of a fanciful kind and he imagines he is a fine gentleman. Sulphur delirium imagines that old dirty rags are beautiful clothes.

A good ideal representative of Phosphorus may be found in the person and character of Aaron Burr, that of Arsenic in Jefferson Davis, and that of Sulphur in any broken down, dilapidated politician.

Practice of Medicine.

APHONIA.

BY C. H. LEE, M. D.

A case of complete Aphonia.—Lieut. L., age twenty-eight, was in the army for three years; a little while before his term had expired, he was in an engagement and received a wound from a musket ball in the left lung near the branching off of the bronchia; the ball lodged in the substance of the lung. As there was no exit, great hemorrhage took place; the surgeon could not extract the ball without great risk of life; the hemorrhage was stopped, and the wound began to heal up. As the wound was closing he began to lose his voice. The wound healed, but his voice was so weak he could not speak above a whisper. I examined his throat and chest and found no abnormal condition, except where the ball lodged there was a somewhat dull and heavy sound like that

of hepatization. He had a dry, hacking cough, and constipation. I gave him Bryonia, sixth, night and morning, for two weeks; his cough left him, but the voice was not any better. I did not give him any medicine for another week; he thought he was better in health; bowels still constipated; gave Bryonia, fourth, three times per day; his bowels became regular; his voice could be heard a little. At the end of the week he was entirely cured. He has now a strong, healthy voice; lungs perfectly sound—the ball still remaining in the lung, I suppose imbedded in a cartilaginous substance. He had been under the hands of several physicians for a year.

PUMPKIN SEED FOR EXPULSION OF TAPE WORM.

BY S. D. JONES, M. D.

Last March, a gentleman called on me for advice, in reference to the presence of a *tape worm*, which had been troubling him for twenty years. He had tried almost all means recommended, and all physicians who offered him encouragement. At various times had obtained portions of the worm, but never secured the head. Turpentine taken in large doses, followed by an active cathartic, had several times expelled portions of the worm and at one time brought away five feet in one piece. The patient was forty-five years old, a weaver by trade. I recommended him to try the Pumpkin seed. He stated that he had used it, but without preparation by fasting before taking the remedy. I directed him to abstain from all food excepting canned peaches and crackers very sparingly for one week. Twenty-four hours before taking the remedy to abstain from food entirely.

The mode of preparing and taking the remedy was after his own notion. He obtained one and a half ounces of the hulled pits, pulverized them very fine and took it all at one dose in the form of a wry powder. Five hours after taking the above remedy he took the following compound (which he prepared himself.) One and a half ounces castor oil, one ounce turpentine; one table spoonfull of salt and the yolk of one egg.

In one hour, this produced a copious discharge from the bowels, and with it the worm *seven feet in length*. The head

was plain and distinctly to be seen. The worm was dead when expelled. The man has ever since enjoyed most excellent health. [See page 47 Am. Hom. Observer, 1864.]

CASE OF CEREBRO-SPINAL MENINGITIS.

BY C. W. HAMISFAR, M. D.

October 15, 1864, I was called early in the morning to see Mr. Acon. aged 35 years. Could not go at the time, but sent four powders, Ico. 3d, and one of Belladonna, 3d. First saw the patient at 2 P. M.; found him perfectly unconscious; staring look, tongue stiff, skin dry and husky, head slightly inclined backward, pulse, 150. Pressing upon the spinal cord would extort the most pitiful and agonizing cries, while at other times he remained perfectly quiet. I now ordered a pot of boiling corn to be prepared, which I placed at his back, along the whole length of the spinal column, under a heavy cover, giving at the same time one dose of Gelseminum 1st, which I ordered to be repeated every two hours, for twelve hours. In ten minutes there was a profuse perspiration over the entire body, which was kept up for one hour, and then wiped off. Oct. 15th, saw the patient about 11 A. M. Eyes dull and red, tongue red and glazed, skin dry and smooth, great rigidity of the muscles of the back and left side; on the back and shoulders appeared eleven perfectly smooth, bright red spots, varying in size from one-quarter to two inches in diameter. Muttering delirium, pulse 80, soft. Gave Belladonna 3d, in water, one teaspoonful every hour, for six hours, followed by Nux v. administered the same as Bellad. Oct. 17th, 2 P. M., eyes dull and heavy, tongue moist and brown, moist skin, muscles considerably relaxed, pulse 40, soft, great tenderness of the spine; on being aroused, he would seem quite conscious, and converse freely, knowing every one in the room, but would immediately after become delirious. Gave Gelseminum 1st and Bryonia 1st, in alternation every three hours. Oct. 18th, 3 P. M., eyes rather dull; tongue coated with a light mucus, skin moist, spots lighter, spine tender, perfectly conscious, memory very poor, has taken a little nourishment from the first, pulse 65. This day is the first that he could be induced

to lay on either side, his position previously being on the back, with his legs drawn up. Continued same treatment two days longer, when he was able to sit up, and rapidly recovered. In the above case the symptoms all appeared in their most aggravated forms. For two days preceding the attack (which was sudden) he had complained of a soreness and stiffness of the back and lower extremities.

ELECTRICITY IN HYDROPHOBIA.

What remedy has not been employed in the treatment of hydrophobia? Mercury dissolved in rectified spirits of wine in large quantities, opium, musk, ipecacuanha, spirits of turpentine, vinegar, the Omskirk powder, the Tonquin medicine, the carnatic pill, oxide of zinc, cuprum ammoniatum, nitric acid, benzoic acid, in short, the whole arsenal of pharmaceutical agents seem to have employed against hydrophobia, but with very little success. I see that electricity has been lately resorted to in the treatment of severe cases of hydrophobia at the General Hospital of Lernberg, in Galicia.

This is not the first instance of the application of electricity in canine madness. The *Journal de Physique*, tome lvi., contains a remarkable case of recovery from hydrophobia by galvanism, extracted from a "Report presented to the class of the Exact Sciences of the Academy of Turin, on the action of Galvanism," by Signor Vassali Eandi. A man presenting all the symptoms of hydrophobia (he had been bitten by a mad dog), was brought to Dr. Rossi, who, observing that he could not bear the sight of water, nor that even of shining bodies, provided in another room a pile consisting of fifty pairs of plates of silver and zinc, intermixed with fifty pieces of pasteboard moistened with a solution of muriate of ammonia. He employed slips of brown paper moistened, as a conductor, on which the naked feet of the patient were placed, and at the moment when he opened his mouth to bite, one end of the arc was thrust into it, while the other communicated with the pile. The patient suffered a great deal from this operation, which, after several shocks, weakened him so much that he could no longer support it. Being stretched out on the floor, he was then galvanized with ease; the operation

made the sweat run from him in drops. This treatment was continued for several days, and resulted in the entire recovery of the patient. This cure, says the report, was effected in the presence of several persons. This was about twelve years ago, if I mistake not. The experiments lately made at the Hospital of Lernberg were satisfactory in so far as the application of electricity had the effect of procuring a temporary relief, though the patients were not saved thereby. Dr. Essrogen, who relates this fact in the *Oesterreichische Zeitschrift für praktische Heilkunde*, is of opinion that had the application of electricity been continued, a complete cure would have been brought about. *Phil. Med. and Surg. Rep.*

Surgery.

THORACENTESIS IN PLEURITIC EFFUSION.

BY DR. BEHIER.

A long discussion on thoracentesis has occupied the Medical Society of the hospitals of Paris; and as the debates were not free from a certain degree of confusion, Dr. Behier has made a critical review of them, the conclusions of which may be thus briefly stated.

Thoracentesis is indicated and ought to be performed: In all cases where the effusion is in large quantity, and does not diminish rapidly under the ordinary means, and still more if it goes on increasing; in all cases where the patient appears too delicate, too weak to bear up against the long process of resorption of an effusion which occupies completely or nearly completely one side of the chest; in all cases where, although the effusion is not very copious, we find the opposite lung impeded in the performance of its function, as by bronchitis, a certain degree œdema, etc.; in all cases where we believe we have to do with a patient predisposed to pulmonary phthisis, whether we are unable to make out its existence, or whether we have proof of it in the side occupied by the effusion, or in the other lung. The last case we willingly allow is by no means favorable.

Before practicing the operation, we wait, if possible, until the inflammatory phenomena have abated; it is generally between the ninth and the eleventh days that we expect to see this abatement. At the same time, it must be borne in mind, that inflammatory symptoms may be altogether absent, or at least very little marked in a large number of cases of copious effusions, and that it is precisely in these cases that sudden deaths are most frequent, as they are also those which recover best after thoracentesis. To refuse the operation in such circumstances on account of the slight apparent gravity of the disease, and because we observe neither violent dyspnoea nor imminent asphyxia, would be, in our opinion, a grave fault on the part of the physician. These cases frequently occur in persons of little vital energy; their very passiveness is often an obstacle to their cure by ordinary means. Little capable of undergoing the process of absorption, we ought to aid such patients in the process, and thoracentesis affords this indispensable assistance.—*Edinb. Med. Jour., from Journ. de Med. et Chirurgie pratiques.*

SEPARATION OF LIGATURES IN OPERATIONS.—Young surgeons are frequently puzzled to decide when a ligature on a given artery should come away, and on consulting their surgical works they find no definite statement to guide them. Mr. Crisp, some years since, determined from a large number of cases the following averages: Common iliac, 18 to 35 days; internal iliac, 21 to 42; external iliac, 13 to 56, average 22 days; femoral, 10 to 45; average, 18 days; subclavian, 10 to 43; average, 17 days; carotid, 8 to 48; average, 21 days; brachial, 9 to 28; average, 14 days.—*Eclectic Medical Journal.*

Miscellany.

ATTENUATIONS AND HIGH POTENCIES.

BY J. R. PIPER, M. D.

PROVINGS WITH ATTENUATIONS.—I am pleased with the book, ("Hale's New Remedies") it supplies a deficiency that existed with me for some years; having used many of the remedies for some years, rather empirically, but with success. There is much good in

this book, and a good deal that might have been left out; for instance, provings from attenuations. Any effects from attenuated medicines can only exist in the imagination of the prover. To have drug symptoms, massive doses must be used; the system must be placed thoroughly under the influence of the drug before any one can say that such symptoms as may be noticed, are clearly the effect of the drug.

CURATIVE POWER OF HIGH DILUTIONS.—I am not a low dilutionist, my teachings came from Hahnemann, and being a practitioner of our school for over twenty-five years, my experience satisfies me that attenuated medicines cure more promptly and certainly than crude drugs administered in drop doses or fractions of a grain. It is true that I occasionally use medicines as low as the first decimal and have good effects from their use, but the good effect of the remedy is not so permanent as from higher attenuations. I will instance Thuya, in small pox; formerly when I used the tincture or third dilution, I was much longer in drying up the scabs than now with the two-hundreth. I have had much experience in the treatment of those cases and none have been more successful than I have been, having only lost one patient for the last three or four years that it has prevailed so extensively in this place. I invariably give Thuya two-hundreth, as soon as the pustules are full, and in five or six days all can be rubbed off dry, leaving no marks. I use three medicines in small pox, as soon as the eruption satisfies me that I have a case of small pox. I give Stibium first; after three or four days, when the pustules are filled, give Mercurius third; when full, Thuya two-hundreth, and I have no case on hand longer than fifteen days, unless some of those irregular cases. When the pustules do not fill properly, Arsenic usually does the work. When the pustules fill with blood, Arsenic is the remedy that has proven successful in my hands. In one case where the pustules, when full, turned blue, as if filled with Indigo blue water, Arsenic brought about a proper condition of the matter and patient recovered.

ATTEMPT AT SUICIDE BY DRINKING CHLOROFORM.—A doctor in medicine, forty years of age, who although most comfortably placed in the world, suffered from melancholy and hallucinations, in a moment of exacerbation drank off 10 grammes (2½ drachms) of chloroform, under the idea that it would

produce speedy death. He felt an acrid sensation in the throat and a burning at the epigastrium. Emollients were administered by the mouth and in lavements, and abundant currents of air were admitted. The stools, which were soon passed, were much impregnated with chloroform, but none of the symptoms usually met with after inspiration of chloroform were observed.—*Med. Times and Gazette*, from *Union Med.*

METALLIC MERCURY IN THE JOINTS.

During my services as an Acting Assistant Surgeon in the U. S. Navy, the above case came under my observation. While ascending the Mississippi River, for operations at Vicksburg, one of our officers carelessly shot himself through the shoe, slightly lacerating one of his toes at one of its joints. On the fifth day after the occurrence, I noticed, while removing a small bandage with ceratum arnica, the same to be sprinkled with small parts of pure metallic quicksilver, to about the amount of half to quarter of a grain. This man had been upon the binnacle list for almost all the time of his sojourn in the ship, principally with diseases of the liver. During those treatments I had learned that he had had the yellow fever twice, once at Mobile, and the second time at the New York Quarantine, and that at both places he had been treated and saved with enormous doses of calomel.

That the constant and excessive use of mercurial preparations made them liable to be retained in reduced metallic form is matter of no doubt, yet has belief become a certainty at least to myself.

I had used in this slight wound nothing but arnica lotions and arnica or simple corates, and hence in no other wise could mercury find its way to it, unless previously located there and brought to light by this accident.

In all my former attentions to his ailments, I had always noted mercurial poisoning the basis of each respective malady, and hence Iodides in various forms constituted the main basis as remedial agents. Those taking further interest in this subject, I refer to the article in the *American Druggist's Circular and Chemical Gazette*.

Rth. (See over.)

The following is the article referred to by our correspondent :

METALLIC MERCURY FOUND IN BONES.—Professor Hyrtl, a celebrated anatomist in Germany, has found in three cases metallic mercury in bones. The first time, about twenty-five years ago, whilst demonstrator of anatomy at Vienna, having found in the bottom of a cellar in which skeletons had been macerated, a certain quantity of mercury, he examined separately, each one of the bones, and found out that those which contained mercury, belonged to a man about whom no information could be procured. The quantity of metal he gathered on shaking the bones might have been equal to a spoonful. Three of his co-disciples gathered also a few drops. Last year Professor Hyrtl again found metallic mercury in the skeleton of a man of about thirty years of age, and which bore traces of periostitis at the inferior extremity of the left radius. About half an ounce was gathered, but it was impossible to find out the quantity lost through the maceration and perforation of the bones. Lastly, Professor Hyrtl mentions a skull of a Malaysian belonging to a collection of skulls sent from India, and so saturated with mercury that the metal would ooze out drop by drop on the least motion given to the skull. It is evident that the mercury thus deposited in bones must have penetrated in them by means of the blood vessels, and came from mercurial frictions made on the integument. Persons still disposed to deny this will be found to yield to evidence, for Prof. Hyrtl is well known to be an intelligent observer whose words merit full confidence.—*Med. and Surg. Reporter.*

ACTION OF OXYGEN.

Physiological and Therapeutical Action of Oxygen on Animals.—Demarquay and Laconte have made a series of observations on the physiological action of oxygen on dogs. They found that these animals were capable of respiring oxygen for a long period of time without other apparent effect than increased liveliness and augmented appetite. They then made extensive wounds in the axillæ of the animals, and observed: 1. That the wound became considerably congested. 2. That a flow of transparent serosity took place from the

injured surface. 3. That after long exposure to the gas, numerous petechiæ or small ecchymoses made their appearance; and 4. Closely similar effects were observed when oxygen was directly injected into the blood. The injection of the gas into the veins requires to be undertaken with care; but it was found that nearly two quarts could be injected without killing the animal, if it were introduced through the vena porta, or through the vena cava, below the liver; the venous blood in these instances did not appear altered in color, the spleen alone, as though it were a blood-gland, (an organ of hæmotosis,) acquired a scarlet tint. All the abdominal veins became turgid, the increase in the quantity of the blood in these parts obviously resulting from the experiments made on rabbits, it was found: 1. That these animals could live from fourteen to seventeen hours in pure oxygen. 2. That when death occurred, the muscular system was universally engorged with blood, and had assumed a peculiar rosy tint. 3. That the ordinary difference in color between arterial and venous blood, contrary to the opinion of Broughton, was perfectly well marked; and 4. That in opposition to the statements of Beddoes, no organ was found inflamed or gangrenous.

On applying oxygen gas to wounds in the human subject, no acute pain is perceived, but pricking and heat were complained of. When the gas was injected into the mucous or serous cavities, the same sensations were produced. In one instance, it effected the radical cure of hydrocele. When placed in contact with healthy wounds the suppurative process becomes modified, the purulent discharge in a few hours becoming less abundant and thinner, the granulations smaller and grayer in tint; but on the removal of the oxygen, they assume a bright color, and if it be applied several hours in the same day it may induce acute inflammation. It rapidly modifies and removes the inflammatory circle of redness which surrounds ulcers, eczema, etc. Oxygen, when respired by man to the extent of twenty-nine or thirty quarts, produces little effect. Various sick persons in these experiments derived benefit from such a dose daily repeated; they perceived sometime a little heat in the pharynx, and a little confusion in the head, or headache; the pulse usually rose a little in frequency and force, but sometimes fell; the appetite improved, and there was a general sense of comfort and of increased

energy. It does not appear to suit those greatly exhausted by suppurating wounds, or those in the latter stages of phthisis.—*Brit. and For. Med. Chir. Rev., from Comptes Rendus, 1864.*

INTRODUCTION OF AIR INTO THE VEINS.—M. Ore has recently experimented on this subject, (*Gaz. Hebdomadaire*, 1863.) He found that though an animal is inevitably killed by the introduction of a given quantity of atmospheric air, an equal and even greater amount of nitrogen, of hydrogen, or of carbonic acid, may be injected with impunity into another animal of the same weight and race. Oxygen may be introduced in almost any amount. An animal which would have been unable to bear eighty cubic centimetres of air, scarcely suffered from the introduction of three hundred centimetres of oxygen. Death may be prevented by the use of electrical currents in such a way as to provoke energetic respiratory movements, even when a quantity of air is injected otherwise sufficient to at once destroy the animal. The author attributes death partly to distention of the right side of the heart, partly to paralysis of the muscular tissue of that organ caused, as he supposes, by a sedative action of the air; he employs electrical irritation of the pneumogastrics, with the view of preventing the latter effect, imagining that dilation of the chest would to some extent remove the air from the heart. A. Mercier does not admit this explanation; the *vis a tergo* necessary to drive in the air with sufficient force to cause mechanical distension of the heart does not exist; and as to the idea of a paralysis caused by the air, it is well-known that the heart of the animal will beat for a considerable period after its removal from the chest. Mercier published in 1837 and 1838, and has since repeated an explanation which appears to agree better with the facts. Death from the injection of air or any other gas occurs with rapidity, because the pulmonary circulation is interrupted, because the brain is not supplied with blood, indeed the condition is just such as would be induced by a prolonged syncope. This interruption occurs, not because the heart is distended or unable to contract, but because the frothy mixture on which it acts does not obey its efforts, but passes with great difficulty, or not at all, through the capillaries of the pulmonary artery. Such a difficulty, indeed, results: First,

because the gaseous molecules have little affinity for the walls of the capillaries. It is a fact perfectly established in physical science, that the passage of a liquid through very delicate tubes is rendered more difficult by its admixture with a gas. Secondly, because the impulse caused by the contraction of the heart is only very partially transmitted to the more remote ramifications of the pulmonary artery, owing to the compressibility and elasticity of the gas. Thirdly, because at the moment of contraction, the valves are not so exactly by a gas as by an incompressible liquid; and for that very reason a reflux takes place with greater ease from the ventricle into the auricle, and from the latter into the veins. The author has found in the inferior vena cava air, which had entered spontaneously by the superior. It is also possible that the viscous condition of the blood is increased or diminished by particular gases. In accordance with his theory, he considers that if death takes place, as in a prolonged syncope, because the brain is too long without the necessary amount of blood, it would perhaps, be possible to delay this termination till the heart could liberate itself, provided the whole of what little blood passes through the left side of the heart, notwithstanding the obstruction, could be carried to the brain. For this purpose he recommends: 1. To keep the head low: the experiments related in Bouillaud's report prove indeed that animals die with greater rapidity when the head is elevated. 2. To compress the axillary arteries and the abdominal aorta, or in case of need the femorals. A dog into whose heart he had passed a considerable quantity of air, passed four times from death to life, and from life to death, according as he pressed or not on the aorta (one axillary artery had been ligatured;) it ultimately recovered (*Gaz. Med.*, 1838.) He considers that electricity facilitates the circulation in the lungs, and should therefore be used when at hand.—*The New Sydenham Society's Year Book.*

GROSS INJUSTICE.—A card is sent to us with the following list of Physicians charges:

For each visit and medicine, within the village, if paid on or	
before the first Saturday night following,	\$0 75
At any other time,	1 00
Night visits, extra,	50
For each mile outside village,	35

No Physician does justice either to himself or patrons by

such charges. He may get a large practice, but cannot afford, at such starvation rates to purchase the requisite books, instruments or medicines. Office consultations should not be charged at less than \$1; outdoor visits \$2, if within one mile; \$25 for accouchment fee. Surgical operations at double present rates.

SINGULAR CASE OF PRECOCITY.

On the 12th of March last, I was called four miles distant to a case of pneumonia. On my arrival, I found my patient to be seemingly a small but well developed lad of eighteen or twenty years of age. He was so low that notwithstanding all my efforts, he did not recover, but died on the 17th (a week afterwards). During my treatment of him I obtained the following particulars from his mother, which were amply corroborated by the people in the neighborhood.

This young man was born on the 20th March, 1860, and was therefore but four years of age! For the first six months after his birth, nothing strange was noticed in his appearance; when one day his mother hearing him cry as if in pain, hastened to the cradle and found his penis in a state of erection, with the prepuce forced entirely back of the glans. When he was but seven months old, she perceived the stain of semen upon his linen, and that he began to grow very rapidly in size.

As he grew his voice became deep and sonorous, and at the time I saw him it was of a peculiar hoarse bass. His height was four feet six inches, and circumference under the arms thirty-two inches. His head measured twenty-two and a half inches, and was peculiarly shaped, being developed from the anterior to the posterior region inversely from that of ordinary children, and almost flat on the crown. His skin and muscles were coarse and hard. The arch of the pubes and scrotum were thickly covered with coarse black hair, two or three inches in length, which had commenced to grow when he was but six months old. His organs of generation did not differ from that of an adult, but the spongy portion of the urethra was rather larger than usual. His face was covered with an incipient beard, such as may be seen in a youth of eighteen or twenty. His weight was about one hundred pounds. There was nothing otherwise abnormal in his structure.

With regard to his mental capacity, his mother says that he knew more than all the other children put together, although they are quite intelligent, and ranged from thirteen years downwards.—Dr. Burdett, of Belleville, C. W., in the *Canada Lancet*.

MEDICAL LETTER NO. 2.

My Dear Friend—Your letter informed me of two things that are matters of sincere pleasure to me. First, that you have concluded to begin your medical studies by attendance on a course of lectures. Formerly it was the practice of preceptors, and to some extent still is, to require their students to pursue a preliminary course of study for two or three years, and then finish up by attending successively two courses of lectures, and graduating. In my boyhood days, a student was expected to pass through the successive stages of studying Latin and Medicine, posting the doctor's books, collecting his bills and compounding his prescriptions. And this consumed not less than two long years. But experience has demonstrated to my mind, that a beginner in the medical art will make a much more rapid progress in learning, to first get hold of the nomenclature of medicine, and then, without farther delay, spend a winter at college; after which, not less than three years should be employed in diligent study, with a proper amount of clinical experience. The student is then prepared to attend his second course, and graduate. Much time and labor is wasted by those who attempt the study of medicine to any considerable extent before attending lectures, unless they happen to have an intelligent and communicative preceptor. And such are very rare. If you have the right teachers at college, they will take you over the whole subject from the very foundation up. The college professor, who assumes that his pupils know anything of medical science, except the bare meaning of the terms employed, will not prove very instructive, except to a small minority of the class.

Secondly. I am pleased that you have chosen a Homœopathic college for your *alma mater*. It is greatly to be regretted that so many of our Homœopathic physicians do not see the necessity and value of patronizing our own schools. They would feel very much chagrined to have no school of

medicine in the country, devoted to the work of teaching the truths they are following in their practice. And yet they know that we can never establish first class medical schools, until every Homœopathic physician gives them a liberal patronage. Medical professorships in our schools are far from being lucrative. Nothing but a whole-souled devotedness to the cause of medical progress will induce any man to hold a chair, or perform the arduous duties of a Homœopathic professorship.

Now that you are at college, let me advise you to be very studious. Avoid parties, theatres, and billiard rooms, as you would poison. I have seen more than a score of promising young men utterly ruined by their contamination in the course of a single session. Give the same system to your studies that your teachers do to their lectures. Let each study hour have its appropriate subject. Be always found in your seat during lectures, and be especially careful to take copious notes of each lecture. I have found in subsequent years nothing affording me greater pleasure and instruction than the notes I took good care to make during my college course. In all my subsequent studies and lectures I have found these notes of equal value with the best of my text books. But besides their value, the process of taking notes will give you the air of studious attention, so much desired by your teachers, and afford you no time for sleep or mischief—things too prevalent by far in most of our medical schools. Finally, do not think because you are a first course student, without the possible loss of a parchment before your eye, you need not try to, and cannot be, the best student in the class. You are seeking a calling of which there can be no true measure of its importance, and yet your time of preparation is very limited, and your qualifications in the end will be far less than you will desire.

T. P. W.

Our Colleges.

OUR COLLEGES are all doing well this winter. Large and intelligent classes at every school.

PROF. HEERMANN, of Philadelphia College, writes, "We are well satisfied with our class, than which a more studious,

interesting and intelligent could hardly even with intention, be brought together. It is not numerous, but as Channing truly says: 'our influence is not to be measured by its quantity, but by its quality.'

"And so God helps our cause, which if slow in its progress, partakes in that of the characteristics of christian doctrine, of which it is the application and exponent in medical science."

Societies.

UNITED STATES HOMŒOPATHIC ASSOCIATION.

At a meeting of the United States Association of Homœopathic Physicians, (German,) held at the lecture room of the Hahnemann College, No. 168 South Clark street, Dr. Ulrich, the President, took the chair.

Dr. Jaeger officiated as Secretary.

During the morning an animated discussion ensued on the propriety of establishing a monthly journal in the German language, to be devoted to the promulgation of Homœopathic theories. The enterprise was supported by a large number of the members, and on the question being put to vote, it was determined to commence the periodical at an early date.

Subsequent to the discussion, a large number of letters were read from members in Philadelphia, Boston, New York, and other cities, to the effect that though the writers could not attend the Convention, their best wishes were with the deliberations of the attending physicians.

In the afternoon the discovery of several new remedies, and combinations of old ones, was announced, and the qualities of the different substances discussed at some length.

A general interchange of opinions followed regarding a large number of subjects connected with Homœopathy. Many cases were cited in which a perfect cure was alleged to have been made upon patients who had been given up by Allopathic Physicians.

The Constitution and By-Laws of the Society were then adopted.

A general discussion ensued upon the subject of dysentery, during which the members detailed their experience, reporting a number of very interesting cases.

The Society then went into an election of officers, with the following result:

President—Dr. Hering, Philadelphia.

Vice President—Dr. Brinstell Newton, Massachusetts.

Treasurer—Dr. Fellerer, St. Louis, Mo.

Recording Secretary—Dr. Kneipcke, Chicago, Illinois.

Corresponding Secretary—Dr. Blumenthal, New York.

Assistant Secretaries—Drs. Lilienthal, Boston; Luyties, St. Louis, and Jaeger, Chicago.

Foreign Secretary—Dr. Lippe, Philadelphia.

A profitable discussion on Trichi—new disease—followed. Dr. Kuechler, of Springfield, Ill., reported several very important case of this malady, which, by vote of the Society, were ordered to be published.

A large number of physicians were admitted to membership. Among them were the following: Drs. Lippe and Hering, of Philadelphia; Dr. Blumenthal, of New York; Drs. Nieblung, Fellerer and Luyties, of St. Louis; Dr. Kuechler, of Springfield, and other gentlemen from Ohio, Indiana, Minnesota and Iowa.

At the second and closing day of the Annual session, letters were read from Boston, Salem and Concord, and several new members were elected. The following subjects for discussion at the next meeting were selected: Dysentery, Diphtheria, Prichniac Disease, Caries, Vaccination, and Incarcerated hernia.

On motion it was resolved to hold the next meeting at Cincinnati, Ohio, in, June, 1865.

A number of topics were discussed, of much interest to the profession.

Several very important cases were reported as follows: Spinal Disease, by Dr. Kuechler; three cases of Hydatids, by Dr. Walker; several cases of female diseases, by Dr. Jaeger; Spinal Curvature, treated with high dilutions, by Dr. Ulrich; Chronic Lung Affections, by Patwasser; an interesting case of Carditis, by Dr. Kneipcke, and a number of other matters of practical interest.

A paper was read by Dr. Kneipcke, on Vaccination, which gave general satisfaction, and is to be continued.

Dr. Richter also read a paper on Social Infirmities, which received merited applause.

The Association then adjourned to meet in Cincinnati, in June next.

ILLINOIS MEDICAL ASSOCIATION.

Transactions of the Illinois Homœopathic Medical Association, 1864, with valuable Papers, etc.

This is a well printed volume of seventy-two pages, and does great credit to the Association. Our colleagues of the State of Illinois are a hard working set of men, as the contents of this volume show. The Transactions proper is not made up of the bald records of proceedings, but embodies the discussions on various subjects of importance and interest which were brought before the meeting. The discussion on "Spotted Fever," contains some valuable practical suggestions relative to the treatment.

The transactions contain the following papers:

Catarrhal affections—By A. E. Small, M. D.—A practical paper in which the treatment is plainly and clearly set forth.

A New Method of Treating Fractures of the Femur in Children—By G. D. Beebe, M. D., late Surgeon in United States Army—To the practical Surgeon this paper is invaluable. The difficulties are admirably overcome by certain dressings, (illustrations of which are given,) invented by Dr. Beebe. Five cases are given in which this form of practice was treated successfully by his plan.

Physiological Infidelity—By R. Ludlam, M. D.—This is an able denunciation of the Physicians who ignore the facts of pathology, and their bearings on the treatment of the sick. It will repay the physician to carefully read and ponder over this paper.

Retroversion of the Uterus—By E. M. Hale, M. D.—This well-known writer on Materia Medica, has, in this treatise, given what the Homœopathic Physician sadly needed, namely, a definite idea relative to the *therapeutics* of this displacement. The treatment is divided into *Mechanical* and *Medicinal*, and is as complete as is possible in the present state of our knowledge of the subject. The symptoms and pathology of the disease is also treated of. This paper will be appreciated if sufficiently studied.

External Remedies—By D. A. Colton, M. D.—The real value of external applications and mechanical appliances, is well elucidated by this writer, who gives ample reasons for assisting our internal treatment by such means.

Remittent Fever — By E. M. P. Ludlam, M. D. — Two interesting cases of this type of fever are given, and their successful treatment.

We have a few copies of this volume on hand, which we will sell at cost, for the benefit of the Illinois Association. Price 50 cents.

Letters.

Letter omitted. See page 23.

FAMILIAR LETTERS.

Dr. Charles Parker's Communication.

PANAMA, N. Y., Dec. 5, 1864.

EDITOR HOMŒOPATHIC OBSERVER: *Dear Sir*—Feeling, as I do, that the interest of your Monthly somewhat depends upon information from different points, I will contribute a short article on the practice in this section; and speak of those who have contributed to give character to our favorite system of medicine in our country.

I think there has been for a number of years a larger share of the true practice of medicine with us than in the State generally. Nearly every section of this county is permeated with the foot-prints of a responsible Homœopathic physician; as we have some fifteen in the county. The most of these are well read, and were formerly old school physicians. Several of the most competent Homœopaths in our county have emigrated to more prominent fields of labor, and for more lucrative considerations. Among these are Drs. L. M. Kenyon and E. P. Cook, of Buffalo; Drs. A. W. Gray and D. T. Brown, Milwaukee; Dr. A. B. Spinney, of Saginaw, Michigan, and others, whose whereabouts does not occur to my mind at this moment. From the first introduction of Homœopathy with us it has been predicted that it would soon die out, but at this time I feel warranted in saying that the practice was never more popular, or commanded a larger respect from the people, than at the present time. Homœopathy became the practice of several of the leading physicians of this county more than ten years ago. I humiliated myself so low as to investigate this theory, and test the attenuations in the most aggravated forms of acute disease, and witnessed such uniform results as

convicted me of the truth of the general doctrine of the law of *similia similibus*. I at once discovered wherein I had embraced this law for years in my application of drugs. The idea of attenuating drugs interested me at the first glance as a great development in medical science. In my first experiments with the specifics, fortunately for me, I witnessed the most ready and unequivocal responses that it has fallen to my lot to witness. Several of these were in croup, pneumonia, pleuritis, scarlatina, cholera, and other forms of violent acute disease, and with us, as in all sections of country, the introduction of this system of practice, it has not only substituted the attenuations, but abridged the practice of the old school largely in the use of their agencies. Who does not remember when almost every prescription was prefaced with a general bleeding. Then came the jalap, cream of tartar, calomel, ipecac, with liberal sized blisters, etc., to rouse the organism, and these followed by narcotics, denominated anodynes. This accomplished, the son of *Æsculapius* felt a great burden removed from his own breast, however much the physical condition of his patient might be aggravated. I cannot better illustrate my own experience as physician in the old school practice than by reference to the great Apostle to the Gentiles,¹ for after his conversion to the true light of the new dispensation, he declares, when going down to Damascus with death orders in his pocket to arraign and put to death his innocent fellow-men, he verily thought he was doing God service. When considering this point of my subject, my mind is directed to the great effort made to prejudice the public mind against all systems of medicine and curatives, except water and hygiene. The amount of books and papers published to secure this object, may well be called legion. I know of what I am speaking, and am willing to admit that there is much in this for which everything is claimed. For one of the readers of your paper I would like to see an article in its columns on the hydropathic practice. I am satisfied that Homœopathy may be successfully compared with and defended against any attack from that source. A personal acquaintance with] several of the leading physicians and writers of that school warrants me in saying that they have never put our practice to the test, or become acquainted with its theories, although they make sweeping denunciations against Homœopathy. We can hardly expect a journal of the size of the

Observer to devote its columns to controversies on medicine, neither do I think it profitable. In my practice, (and I have had much to do with water and hygiene), I find them to be glorious adjuncts to our practice, when properly administered, in most forms of disease.

Yours, etc.,

CHAS. PARKER.

Letter from Lewis Dodge, M. D.

DR. E. A. LODGE—Dear Doctor: If you will accept a miscellaneous contribution for your valuable journal, I will venture a few thoughts. As in the past, so (as long as Providence shall permit me to live and labor), I shall be a firm friend of the true principles and practice of Homœopathic medicine, as I interpret its teachings and fundamental principles gleaned from extensive reading the past twenty years, confirmed by nearly as many years of general practice, and as long and varied experience in hospital and college clinics, as usually falls to the members of our profession. I claim that our fundamental law underlies and is the basis of the most successful practice of the so-called regulars, and that if our profession can be held together, and the professional envy that so often causes Physicians occupying the same fields to spend their time in "bearing false witness against their neighbor," that ought to be devoted to careful study, they would take away from the antiquated school of medicine their most effectual argument against us. We cannot expect an entire uniformity of sentiment on all the questions pertaining to our most intricate science, yet we ought to expect more of that sterling and rare virtue, Professional fairness, enjoined by our national code of medical ethics. The continual changes noticed in the chairs of our medical colleges, leads to bad effects on our system of medical education. The best talent requires a few years experience to become even a good teacher, and if a Professor has some faults, (and who may not have some,) his brethren had better in kindness, point them out and labor for their correction rather than to seek his removal, and, then as an apparent justification, resort to means to injure his professional standing. I have studied law as an accomplishment, and most heartily endorse the sentiments in Prof. Winslow's medical letter No 1, in the November No. of your Journal. I have labored industriously and with some personal sacrifice for the promotion of medical science, and shall ever highly esteem the true

physician. I believe they are the more poorly compensated for their ever unceasing labors and anxieties, than any other class of professional men, and for this, our profession are the parties at fault. Your journal has called out much valuable clinical experience in the reports of societies, and from individual practices. There is an old Greek proverb "Eis aner, Eandies aner," which signifies, "one man is no man." These old sayings of the deep thinkers of antiquity are more profound than is apparent on the surface, and this one tersely and concisely expresses the great truth, "That man is never independent of his fellow man." Since the introduction of Homœopathy a new impulse has been given to medical associations, and as a result, the establishment of a more scientific practice of medicine and surgery. A careful examination of the bills of mortality show an increase of the duration of human life, so that the tables of expectancy allow an average of two years more than the former average of the duration for annuities, etc., fifty years since, and a reduction of mortality of 22 per cent. If we had the statistics of infant mortality under Homœopathic treatment, they would show a still greater reduction, thus giving evidence that our science has materially lengthened human life.

A careful examination of this subject will show that what man desires most of all earthly things, viz: health, is secured to him in fair measure by the unnoticed labors of our ill-rewarded profession. In the lapse of half a century twenty-two persons saved alive out of every hundred, all of whom must have previously perished, is a great achievement. All the other great improvements of the same time can hardly single out a life they have saved. There sphere has been to save labor, and many of the inventions relating to war material, to destroy life. If the benign principles of our practice could be adopted by government in our army and navy, I have no doubt many an unfortunate soldier and sailor would have returned to his home, bearing the limbs uselessly sacrificed by the surgeon's knife, when our treatment would have prevented the setting in of the fatal hospital gangrene, or arrested it before the vital life current had been poisoned by it.

Our Calendula and other preparations for local applications, would have healed many a wound, leaving hardly a perceptible scar. The fatal camp diarrhœa and dysentery, and the various grades of typhoid fevers and of erysipelatous inflam-

mations, diseases of the lungs, etc., etc., would in many cases have promptly yielded to our treatment when the antiquated practice has entirely failed.

Cannot this subject be so presented to the next Congress, that such action may be had as shall give us the care of general hospitals in which our practice may have a fair trial.

Yours fraternally,

BUFFALO, N. Y.

LEWIS DODGE, M. D.

Personal.

DR. E. BROWN SEQUARD, the distinguished physiologist, is now a resident of Boston. He has recently removed to this country to fill the chair of Physiology and Pathology of the nervous system, which has been established in the Harvard University Medical College, at Cambridge, Mass.

TO OUR SUBSCRIBERS.

With a cash-paying subscription list, very much larger than we expected; with a corps of talented correspondents, who have made our journal interesting and useful; with the promise of aid from the pens of some of the ablest writers in our school; with all these things in our favor, we have ventured to enlarge our monthly, without a corresponding increase in price. We feel very grateful to our friends for their generous support, and hope they will aid us to make the present volume far better than the first.

We send the present number to all our old subscribers and hope that they will renew their subscriptions. If they do not wish to continue, they will please return this number which will be sufficient notice of discontinuance. There are some who still owe for 1864, if they will promptly remit \$2, they will receive receipt in full for both years (1864 and 1865.) And we will supply the journal at cost (\$1) to any friend who will send us other names besides his own, with \$1 for each subscription. Single subscription will be \$1 50, in advance.

AMERICAN HOMŒOPATHIC OBSERVER.

VOL. II.

FEBRUARY, 1865.

No. 2

Practice of Medicine.

APOCYNUM CANNABINUM.

ITS USE IN CORYZA OR COLD IN THE HEAD.

Some years since, when engaged in making the first decimal trituration of the bark of the root of this plant, I observed that the schneiderian membrane became affected very similarly to what is experienced when suffering from a very bad cold in the head. I have been subject to severe attacks of coryza from my childhood and am quite familiar with its symptoms, and immediately noticed the very close resemblance between these and those produced by inhaling the pulverized Apocynum. This experience suggested the idea that this plant might prove curative in the affection which had been a source of annoyance to me all my life. The first opportunity that offered, I tested the remedy upon myself both by snuffing and internal exhibition, and to my great delight experienced speedy relief. At least I had so nearly, as I can remember, always found that when the characteristic dryness of the nose set in, it was followed by an exceedingly irritating watery discharge which lasted for several days, mostly involving the eyes, and passing off in abundant secretion of thick mucus. But when I used the Apocynum, immediately on experiencing the first morbid sensation, the disease in almost every instance abated and insensibly passed away within a day or two. I have frequently prescribed this remedy for infantile coryza, which is often fatal in very young children by interfering with respiration, and very generally the results have been quite satisfactory.

Although I had noticed years ago the pathogenetic effects of Apocynum when inhaled in a minutely divided state, and

schneiderian membrane, I did not, till quite lately, meet with similar effects from its internal exhibition. About the middle of November last, I had a lady under my care, the subject of Ascites, and to whom the necessity for tapping was then imminent; she was exceedingly anxious to avoid the operation, and wishing myself to gratify her if possible, I prescribed a decoction of the fresh root of the plant according to a suggestion in Dr. Hale's New Provings, a small table spoonful to be taken every two hours. Towards the evening of, I think the third day after she began the medicine, she complained of dryness and stiffness in the nose, chillness and general malaise. She asked me if these symptoms could be produced by the medicine she was taking, as she had not exposed herself in any way by which she could take cold, and that she had never taken cold in the head but always in the throat and breast. She discontinued the medicine when she went to bed, was somewhat feverish during the early part of the night, but in the morning all the symptoms had disappeared. She resumed the medicine, the symptoms returned in the afternoon, and in the evening she finally discontinued it. The next day the coryza had disappeared, followed by no discharge of mucus or any other effect such as commonly occurs. I had twice given the tincture of the root to this lady before, in considerable doses, and although I was always disappointed in obtaining the desired effect upon the dropsy, it was in both instances followed by Uterine Hemorrhage, she being past the turn of life.

I would remark that to derive benefit from this remedy in coryza, it is prudent to begin it with the first admonition of taking cold, to persevere in its use, and I need hardly add avoid such exposures as tend to increase the disease and neutralize the effect of the medicine. I prefer for snuffing a very small quantity of the bark of the root, reduced by itself to an impalpable powder.

J. H. MARSDEN, M. D.

YORK SUL. SPRINGS, Pa.

NOCTURNAL ENURESIS.

In the December number of the "Observer," under the above caption, is the report of a very interesting case of

Nocturnal Enuresis, from my register, by L. S. M., rendered still more interesting if possible from the fact of having baffled the best directed efforts of our Allopathic brethren. The time required to effectually eradicate a chronic difficulty of such long standing is usually somewhat greater than that reported in this case; when therefore, in a very short time a troublesome disease is *speedily, cheaply, and apparently effectually* cured, by — What! So far as time and *compensation* are concerned, I have not the slightest objection to offer; indeed I think them both highly commendable, so far as the patient is concerned. But in the name of Homœopathy, I enter a protest against such practice; that, where a disease apparently so easily conquered by its specific remedy, should be of no more benefit to the young practitioner as a guide in a similar case than the present one appears to be. *The disease is cured*, I admit, but what is the clinical experience resulting from such practice worth as a landmark to the beginner in his first researches after *truth*. Benz. acid, Cantharis, Belladonna, Hyosciamus, Podophyllin were all used, but not after each in succession had failed to produce the desired result, in which case there would have been ample justification, and cogent reasons for their exhibition.

November 3—She called and reported that she had had no enuresis since taking the first dose of Benz. acid. Even now, why was Benz. Acid not continued *alone* as the patient was improving as rapidly as possible without any “adjuvants.” I contend (and I think the majority of practitioners will agree with me) that each of the *adjuvants* mentioned would have been homœopathic to nocturnal enuresis, and consequently curative in its particular sphere in certain forms of the disease. I fear the majority of us alternate remedies sometimes, when we can not give any very good reasons for so doing. In a great many diseases, a single remedy would embrace the majority of the salient symptoms of a disease, and the clinical experience of such practice would be vastly more satisfactory. But some physicians are so much in the habit of giving two or three remedies in alternation, that instead of searching for a single remedy to apply in the case, they invariably look for two or three to use in alternation, or what is very much worse to use in combination after the teachings of “Father Æsculapius.”

There can be but one or two excuses for such a practice.

AMERICAN HOMŒOPATHIC OBSERVER.

and these strike directly at the root of all scientific progress in our noble art, viz: either a careless habit of prescribing which in the end amounts to *routinism*, or a lack of knowledge of that great essential absolutely necessary to the success and respectability of every Homœopath, to wit, our *Materia Medica Pura*. Were he an Allopathic physician, there could be no possible objection to such a course, for the dispensaries and text books on practice furnish all the necessary formula, without any thought or study on the part of the practitioner, save that of forming his diagnosis; and his diagnosis once formed he can send forth his deadly compounds on their errands of destruction, *secundum artem*. Surely no Homœopath would take such an example for his guide in the administration of remedies after the law of similars? But, after all the sacrifices that have been made, and after all the labor that has been expended in the compilation of our *Materia Medica*, the least that we can do as humble followers of worthy pioneers, bearing upon our shoulders the responsibilities of rightly presenting the claims of Homœopathy before the Medical world, will be to contribute our mite in such a manner, that some few rays of light may be thrown across the path-way of those who are destined to be our followers. I am aware that it is an easy matter to criticise; much more easy than to perform. But when we report cases, that are intended to benefit and instruct the medical profession, they should be reported in such a manner as to be a *landmark* to younger members of the profession (to which class I have the honor of belonging), who are more particularly interested in them. Oh Hahnemann! I fear thy mantle has already fallen upon too many of thy disciples who are much more willing to *write* than to *investigate*.

In conclusion, I wish it distinctly understood that I do not criticise the *Doctor*, but the *principle*; not the *practitioner*, but the *practice*.

Fraternally yours,

H. C. ALLEN, M. D.

COLLINSONIA CANADENSIS IN CONSTIPATION.—Mr. W., aged seventy-one years, had a sudden attack of retching flatulence, no stool for five days, coughing up a great deal of tough, grayish mucus; gave *Collinsonia*; thirty-six hours after, stool and since regular; then gave *Sticta* for cough, and succeeded well.
R. S.

BOLETUS PINUS IN OBSTINATE INTERMITTENT.

BY O. P. MAHN, M. D., OTTAWA, ILL.

A few weeks since I received from Dr. E. M. Hale, of Chicago, a small quantity of the first decimal dilution of the *boletus pinus*, with the request that I should test its alleged efficacy in some case of obstinate intermittent. Luckily such a case was found. A gentleman about 30 years of age came to me in July; said he was laboring under attacks of ague every few weeks; sometimes quinine would break it up, sometimes it would not. I prescribed for him twice, but did not benefit him any. About two weeks ago he informed me that he still had the ague, and feared he would have to leave the country, or die with it. I got his permission to try the new remedy. Gave him five drops of the 2d dilution every three hours. Yesterday he called and informed me that he had had no paroxysms of ague since beginning the medicine. The first dose seemed to give him new strength and vitality. The symptoms of the case, as near as I can ascertain, were as follows:—

During the chill—Sudden darting pains in the back and limbs; strictly uneasy feelings; great prostration; cold, pinched sensation; great desire to get near the stove; unable to get warm; numbness and dead feeling of surface, with desire to use friction to get up a proper warmth.

During the heat—Gets gradually warm in two or three hours; headache; flushing of face; heat of surface; great languor; no inclination to stir.

After the paroxysm—Dull, numb sensation; no sweating.

During the apyrexia—Bowels constipated; putrid taste; loss of appetite; feeling of weakness at epigastrium. The paroxysms come on every second day or every seventh day.

SPURIOUS DIPHTHERIA.

BY SMITH ROGERS, M. D.

Many are at present treating a disease in many respects, resembling diphtheria, and often mistaken for it, but which will be found differing from that disease both in its nature and its results.

During the prevalence of any epidemic it is usually noticed that there is a strong tendency in every affection to assume some appearance of the particular form of disease which is prevailing. When cholera prevails, for example, there will be an unusual number of cases of severe diarrhœa and vomiting which recover. There is a tendency to cholera, but it would be a misapplication of terms to call them real cholera cases, and so it is, I believe, in epidemics of diphtheria. Throat affections have a tendency to take on this form of disease, and many which are called diphtheria, and are even treated as diphtheria, are merely examples of the disease I am about describing.

We hear of one man curing diphtheria with one remedy, while another is equally successful with entirely different remedies, which, if applied in case of true diphtheria, would be utterly impotent and useless. It is of importance then to distinguish between the two affections, and I shall now endeavor to sketch the characteristics of Spurious Diphtheria. In a recent outbreak of diphtheria my attention was drawn to a certain class of cases, which presented some of the symptoms, but never assumed such a serious nature or called for such a vigorous plan of treatment as those which had previously been under my care. In the cases to which I allude, the patient usually complains first of a curious feeling in the throat, as if a pin were pricking it, there is languor, with pain in the back and legs, sometimes tenderness on pressure on the outside of the throat, just under the jaw; on looking at the throat the tonsils and uvula are more or less tumefied and of an angry red color, and on their surface small, irregular shaped, yellowish white spots will be observed. The spots are of an aphthous nature, sometimes two or three on the uvula, and sometimes the whole palate may be covered. However great their number may be, I have observed that their edges do not coalesce,—each spot is isolated; they never look excavated but seem as if they just floated on the mucus which moistens the throat.

The treatment of spurious diphtheria is very simple. A few doses of *Phytolacca dec.* in alternation with *Guaiaicum*, and a gargle of chlorate of potash will suffice to cure. As far as my observation has extended it never proves fatal. Though accompanied with debility I have never seen it followed by paralysis or albuminuria. The tonsils sometimes suppurate after an attack. A patient who has suffered from this affection may subsequently be attacked with true diphtheria.

This spurious diphtheria seems to be most prevalent amongst young females.

I will give in my next the diagnosis and treatment of true diphtheria. I have treated a very great number of cases, and as a usual thing had very good success.

GELSEMINUM AND PHYTOLACCA.

GELSEMINUM IN THREATENED ABORTION.

Presuming you are interested in all facts concerning the progress and results of new homœopathic remedies, I will report a case which occurred in my practice, in which I was led to try the effect of a remedy you have so fully described in your work on "New Homœopathic Provings."

Dec. 12. Was called early in the morning to see a woman suffering with severe labor pains, every five or ten minutes. She was in the sixth month of pregnancy. Her first and only child was born at seven months. A little more than two weeks since she had a similar attack which was relieved in about a week by a homœopathic physician. Pulse full at 80; fever considerable: gave Acon. and Bry. 6th.

In the course of three hours I called again, and found her much troubled with nausea and vomiting. Gave Ipecac 6th, and in 15 minutes repeated it. At the end of the half hour all nausea was gone. I then left Secale cornut, 3d, four drops to half a goblet of water, a teaspoonful to be taken every half hour for three hours, then to continue Acon. in alternation with Bell. every hour.

In the evening I called again, found no change for the better; pains every five minutes or oftener. I then thought of Gelseminum semp. Gave 15 drops of the tinct. in half a goblet of water a teaspoonful every hour.

Dec. 13. 10½ A. M. Pains very slight, not oftener than two or three hours. Fever gone, pulse 68. Some pain in abdomen upon moving. Continued Gelseminum once in two hours, with an occasional dose of Acon.

Dec. 14, 2½ P. M. Found the patient at dinner. She came running up stairs to see me, and said she had not felt as well since she became pregnant, and thought I had just hit her case.

I was induced to try the Gelseminum from the great stress which you laid upon it as regards its action upon the circular fibres; and although I believe you do not mention a case of threatened abortion being relieved by it, I thought it was a good opportunity to try its virtues, and of the result in that case at least I am fully satisfied.

PHYTOLACCA IN DIPHTHERIA AND RHEUMATISM.

I have had equally good results in diphtheria with Baptisia and Phytolacca.

With twelve doses of Phytolacca, 3d dil., I have relieved, and I think cured a case of chronic rheumatism, in a man nearly sixty years old, which had withstood all kinds of treatment for eight years. He says he can hop and skip now like a child. About a week after I commenced treatment he walked nearly a mile to my office without even a cane, a feat he had not been able to accomplish for several years.

Allow me to thank you for the good you have done the profession in the publication of your "Provings." I regard it as of more comparative value than all the others I have seen.

Boston:

G. M. PEASE.

Above was reported to Dr. Hale.

PHYTOLACCA IN SCARLATINA.

BY F. B. MANDEVILLE, M. D. ✓

Nov. 20th. Was called to see Aaron S., aged 14 years; found him laboring under Scarlatina anginosa. Gave Bell 5th and Iod. Mer. 1st.

Nov. 21st. No improvement. Gave Apis mel. 3d and Bell. 3d.

Nov. 22d. Fever continues to rage with unnatural severity; no eruption; nose and lip very much excoriated by an acrid discharge; slight delirium. Gave Kali bi chrom. 3d, Ver. vir. 3d.

Nov. 23d. Rapidly growing worse; called in consultation Dr. A. Every evidence of rapid dissolution. Gave Kali bi chrom. and Hyos.

Nov. 23d, 6 p. m. No improvement. Thought I would try Phytolacca. Gave that and Prot. iod Mer. 2d.

Nov. 24th, 9 A. M. Some improvement.

Nov. 24th, 4 P. M. Breathing same. Delirium subsiding, throat improving.

Nov. 25th. Great improvement in all the symptoms.

Nov. 26th. Same still improving.

Nov. 30th. Patient discharged.

I have used the *Phytolacca* several times with the same gratifying success, and would recommend its trial by others in the profession.

DR. NORMAN JOHNSON reports very good success in the treatment of Measles with *Phytolacca*.

HYDROTHORAX.

HYDROTHORAX CURED BY *APOCYNUM CANNABINUM*.

MRS. V. R., Oct. 27th, a weak, nervous and delicate woman was pregnant with her second child, and expecting every day to be confined. Six days previous to her confinement her feet and limbs began to bloat, kidneys ceased to act, great dyspnœa, and a dry hacking suffocating cough set in. Regardless of the dropsical condition of the lower limbs, they mistook the symptoms for Asthma and allowed the disease to continue, expecting every hour the attack would yield. As she steadily grew worse and the dyspnœa increased, they finally sent for me. I immediately notified them of the error they had made and informed them of the presence of water in the chest. Gave *Ars.* 3 centesimal through the day. The following night she was confined, but contrary to my expectations the accumulation of water continued. She could not breathe in any other but a sitting position, with the head thrown forward. The coughing had increased and was now incessant, great thirst, scanty urine, small weak and quick pulse, and clammy sweat. Continued *Ars.* and added *Aconite* to allay the fever. Next morning found my patient even worse, if possible. The friends were very much alarmed and met me with, "well Doctor, if you can do anything to help her it must be done quickly." I prescribed *Apocynum cann.* five drops every two hours. The result was satisfactory in the extreme. Next morning, auscultation and percussion revealed the gratifying fact that the water was diminishing in quantity; and the dyspnœa, cough and anguish rapidly yielded to the magic virtues of the hemp.

I commenced its use at a time when every symptom pointed to a fatal and speedy termination of the attack.

I commend its use to the notice of the profession in Hydrothorax.

JONESVILLE, Jan. 5, 1865.

H. M. WARREN.

At the Wayne County, N. Y., Homœopathic Med. Society, December 6, 1864, Dr. Sweeting related cases of Vaccination from vaccine taken from the arm of a returned soldier, which produced terrible results. It was found that by vaccinating with matter taken from one suffering from Typhoid fever, or Chronic Army Diarrhœa, ulcers and terrible constitutional results were produced.

Dr. Goedecke advocated the internal administration of Variolin as a safer and better mode of vaccination.

Dr. Goedecke related a case of Rhus poisoning cured with Bryonia, pronounced Erysipelas, and treated as such with no beneficial results, by some of the most skillful physicians of the old school in New York city.

ÆSCULUS HIPPOCASTANUM IN HEMORRHOIDS.—1. Mrs. H., a German woman, mother of four children, constitution impaired by Allopathic purgatives and emetics, had *Hemorrhoids* for twelve years. Nux had given some relief; always troublesome during pregnancy; a small vial of *Æsc. hipp.* cured her.

2. Mrs. W., mother of five children, robust and energetic, thought Hemorrhoids to be *part of her being*, did not even mention them, as she could not sit or lie down with ease, had to be pumped hard before she owned them; when bleeding, had some relief. Cured by *Æsc. hipp.*, two weeks after *Collinsonia can.* I just saturated the globules with the tincture and ordered four gl. four times the day for a week.

R. S.

PODOPYLLUM IN JAUNDICE.—Miss C. K., away from home, was taken with jaundice; doctored by the two best Allopaths in town for eight days; came home with a box of M'Lean's liver pills and an eight ounce bottle of some mixture. Skin beautiful yellow all over, languid, weak, eyes a little inflamed, saw a green or yellow circle around the light; throat dry.

Gave Podopyllum, 1st trit. every three hours one powder for three days. Jaundice all gone; omitted medicine for a few days, and gave Mercur. viv, 1st trit. Was entirely well in about eight days, except the irritation of the eyes which was of longer standing. ✓ R. S.

CORNUS FLORIDA IN INTERMITTENT FEVER.—In the February number of the Observer, I noticed an article calling attention to the Cornus Florida, in the 'treatment of Ague. Since then I have treated several cases with Cornine 3d trituration, it breaking up the disease at once.

The three stages of the disease were present and succeeded each other in regular order. G. E. EHINGER, M. D.

Surgery.

A CASE OF OVARIOTOMY.

BY S. D. JONES, M. D.

Mrs. C——, aged 31, of Alton, Ill., after consulting many of the best physicians of our county, and finding but little encouragement of being cured, in 1856 placed herself under my care. In the year 1847, upon the return of her menses, after the birth of her first child, she experienced pain in the region of the right ovary, which continued to recur monthly, growing gradually more painful. A tumor was soon discovered, which rapidly increased her suffering; grew more frequent, until she was seldom free from pain. The pains were somewhat intermittent, simulating labor-pains, severest at the monthly period, continuing for several days. On partial subsidence of these severest paroxysms, a jelly-like substance, of a chocolate color, would be discharged for several days, from the vagina.

Upon examination during the pains, I found a large tumor forcing itself down into the pelvic cavity, lying behind and to the right of the uterus, and could be elevated but very little by pressure on it by the fingers in the vagina. There was no encroachment on the lungs, consequently but little difficulty in breathing was experienced. The uterus was crowded over to the left iliac fossa, and its cavity, apparently obliterated by the

right lateral pressure it sustained from the tumor. The tumor was undoubtedly involved in the substance of the uterus and broad ligaments too much to admit of its easy removal by an operation. During the absence of pain the tumor did not descend so low down in the pelvic cavity, the upper end rising up as high as the umbilicus. I could not offer the patient much encouragement, but at her earnest solicitation I resolved to try an experiment with a hope that it might at least afford temporary relief. When the expulsive pains were on and the tumor forced low down, I introduced a *trocar* into the tumor through the walls of the vagina. I inserted the instrument about two and a half inches; removed the trocar, and left the *canula* but no fluid followed. I then undertook to remove the canula, but the fibrous structure of the tumor grasped it so firmly that it required considerable force to extract it. I continued probing it (the tumor) every two or three days for a month or six weeks, when I succeeded in exciting suppuration. A soft spot was perceived. I made an incision into this soft point through the walls of the vagina; when a large amount of jelly-like substance, I think a quart, was discharged. She then rapidly recovered, and remained quite well for three years, when she became pregnant, and had fair health during gestation. After her delivery and the return of her menses, the tumor again made its appearance in the same place, attended with similar symptoms. Since that time she has suffered intensely all the time, remitting somewhat occasionally. Her pains are similar to and as hard as that of natural labor. The tumor is about seven inches long and three in diameter. In May, 1862, she again returned and placed herself under my care, with a determination of having an operation performed, and the tumor removed by an incision through the abdominal walls. At this last request of the patient and her husband, the nature of the case was explained, and the operation discouraged. Although it might succeed, yet it was the only hope of a cure or permanent benefit; that it was the last resort of our art, attended with great danger to the patient, and responsibility to the surgeon; that the operation might be commenced with a fair prospect of success, and, after the incision was made, it might be found necessary to abandon it on account of the nature of its attachments or adhesions to other organs; that if all things were most favorable, and the operation completed, she might still die in consequence of hemorri-

hage, peritoneal inflammation, or tetanus. Notwithstanding all these discouragements, the patient and her husband determined to have the operation performed, feeling that she could live but a short time in her present condition. The patient was under treatment, with a careful and restricted diet, preparatory to the operation for about four weeks. The operation being determined upon, and all things being ready, the patient was brought under the influence of an anæsthetic, viz: one part chloroform and three of ether; with the assistance of Dr. Miles and Prof. D. McCarthy, an incision was made commencing about an inch below the umbilicus, in the right linea alba, and extending to near the pubis, about five inches in length. The peritoneum was then snipped at the upper end of the incision, and divided on a director. The omentum was found extending over the tumor and adherent to the abdominal wall. This was removed, and the tumor exposed to view; having a small one about the size of a hen's egg on its outer side involved in the meshes of the omentum, which was at once torn loose and removed. The large tumor was then found to consist of two large portions, constricted in the middle, and could not be said to have any pedicle, as this smaller central portion was composed of the right ovary, broad and round ligament, and the right posterior surface of the uterus. It was now evident from the extensive adhesions that it could not be removed, and it was deemed best not to remove any portion of it, as the incision and laceration would involve so much injury as to render the case most certainly fatal. It was therefore returned to its place; the abdominal wound closed by three hare-lip sutures, with interrupted sutures between each two, and adhesives strips covering all. Then a compress was adjusted over the wound, and broad bandage around the body like a binder after labor. She was then permitted to recover gradually from the influence of the anæsthetic, without the use of stimulants. In one hour she had pretty well recovered from the anæsthesia, and vomited a large quantity of bile. She was restless through the night, frequently vomiting bilious matter.

First day after the operation at 12 M., pulse 120 with great thirst; gave a spoon of ice water every few minutes, Aconite 3d dil. every two hours, 5 P. M., pulse 96 and faltering; surface of body hot; vomited once since 12 o'clock; complains of feet burning.

Second day—6 A. M., pulse 90; less thirst for the last twelve hours; has been free from nausea and vomiting; has had frequent spells of sleep during the night; 12 M., pulse 90, full and regular; patient has taken some nourishment, wound healing by first intention.

Third day—6 A. M., pulse 84, tongue covered with a whitish coat; slept calmly during the night, and is much refreshed; no suffering.

Fourth day—Pulse 78; slept well during the night; takes her food regularly; wound healed; no swelling or inflammation.

Fifth day—6 A. M., pulse 75, slept all night.

Sixth day—6 A. M., pulse regular; had no sleep, owing to a pain in the side from coughing; appetite good.

Seventh day—Slept badly in consequence of pain in right hip and leg; removed pins and stitches from wound; wound entirely healed, not a particle of suppuration. The bowels were kept free by enemata of warm water.

Ten days from the operation, the patient was entirely convalescent so far as the operation was concerned. At this point her old trouble commenced, in almost its full force. The pains commenced in regular paroxysms, coming on in the evening and lasting all night.

I would say here that the small tumor before mentioned as having been removed, was filled with a substance of the appearance of ordinary *faeces* but having no odor.

Two weeks after the operation, the patient was able to take her walks and rides as usual, although her sufferings had become as severe as at any former period, and assuming the same general character returning regularly every day and lasting from six to ten hours.

The hope of relieving my patient by any ordinary processes of surgery, was not very flattering. In this condition she could not live long, my patient was not yet willing to give up without further efforts, and at her and her husband's earnest solicitation, I determined to make one more effort to relieve her sufferings and if possible save life. The only way presented to my mind, which offered the least hope of relief, was to pass a tube through the wall of the vagina into the tumor, so the contents might escape through it. I procured a small silver tube two inches in length and one quarter in caliber, with a flange or head on one end large enough to prevent it from passing through the orifice for the body of

the tube. I placed this on a trocar or probe with the flange next to the handle of the instrument. I took the instrument thus armed and placed the point on the most prominent part of the tumor (which by the expulsive uterine pains had been forced well down in the pelvic cavity. I then forced the probe with the tube through the walls of the vagina into the tumor, placing the flange on the tube close against the wall of the vagina. The dense and fibrous structure of the tumor rendered it difficult to force the instrument through. The trocar or probe was removed, leaving the tube remaining in its place, thereby making an external opening or channel for the contents of the tumor to flow into the vagina. At first the discharge was slight, owing to the consistency of the contents of the tumor. This discharge gradually increased, until the contents were removed. After a lapse of twenty-four hours, the paroxysm of pain entirely subsided. In this condition, with the tube in place, she returned to her room and continued in the enjoyment of good health for four months, when the tube became closed up, and the contents of the sack began to fill up and a return of paroxysm of pain as before; only this time more severe and protracted. She continued to suffer on in this condition, confined the most of the time to her bed; and almost despairing of ever being relieved of her great suffering, except in death. In May, 1863, she again returned to me for advice and treatment. I now determined to make one more trial, by injecting into the tumor caustics and destroy the sac or walls of the tumor. I procured a large trocar with silver canula. I forced this into the tumor through the vagina, during one of her severe paroxysms of expulsive pains, removing the trocar and leaving the canula: through this I injected a mild solution of sesqui-carbonate of potash. The contents of the tumor were soon removed through this tube. I continued to inject the tumor, gradually making the solution stronger, until an acute inflammatory action set; in this inflammatory action extended to the entire abdominal viscera for about one week, endangering the patient's life. Aconite 3d was given every hour, cool compresses to abdomen and the patient allowed to take small quantities of ice water very frequently. During this inflammatory period, the tumor was injected with tepid water. Suppuration of the tumor now took place and large quantities of pus and offensive matter were discharged. The discharge became so

offensive, that it was almost impossible for a nurse to remain with her, although disinfectants were freely used.

The canula was now removed and the matter continued to discharge for about three weeks, when it ceased and the patient convalesced rapidly and returned to her home. Her menses returned at their regular period and have continued ever since.

A few days since—seventeen months after returning home the last time, I received the following letter from her:

“I have enjoyed most excellent health for the last year, my hair all came out and has grown in again curly and black, so that you would not know me from a young girl.”

DIRECTIONS FOR VACCINATION.

BY DR. E. CUTLER.

FORMS OF VIRUS.—(a) DRIED LYMPH ON QUILL POINTS. (b) LIQUID LYMPH. (c) CRUSTS.

(a) *Dried lymph upon the concave or convex surface of the points of quill segments.*

Having made the skin tense, with a sharp lancet point crucially abrade the cuticle. Draw little if any blood. Then rub the charged quill point into the abrasions, and expose to the air till dried. No further dressing is needed. One quill will thus charge three abrasions.—(*Dr. Martin's method.*)

(b) *Liquid lymph in capillary glass tubes.*

Pick out the cotton from one end of the chunk of wood. Depress that end, and the tube will slide out. Crush the ends of the tube with the thumb and finger, and warm the tube by the breath. Blow out the lymph upon some hard unabsorbent surface,—as the thumb nail,—and if the lymph is not all employed, it may be redrawn into the tube, and the ends stopped with melted sealing wax. The lymph may thus be preserved for future use. Proceed as in (a), except that the lymph should be laid on the abrasions with a lancet, and gently pricked in.

(c) *Crusts.*

Rub up a portion of the crust in the water or milk, or saliva, upon a bit of glass, to the consistency of thick cream.

Abrade as described in (a), and then lay on with the point of a lancet.

In cases where difficulty is experienced in making the virus take, the cuticle may be raised by placing minute portions of *Cerat. Cantharidis* upon the arm or leg, and covering with adhesive plaster. After the blister is raised, the cuticle is to be removed, the denuded surface dried of its superfluous moisture, and either the charged quill points rubbed in, the liquid lymph laid on, or the pulp of the crust put upon it. It is necessary to be careful to expose to the air until perfectly dry.

We would add to the above that the use of the Spring Vaccinator saves much time, economizes vaccine, and when the matter is fresh and pure, there seldom occurs a failure.

Miscellany.

HOW TO TEACH ANATOMY.

Having tried the prevalent method of teaching Anatomy for several years, I became painfully conscious of several grave defects, one of which I shall mention here, and endeavor to explain how, as I think, it may be successfully obviated. First, in teaching osseous anatomy, all our medical professors so far as I know, are accustomed to combine a description of the bone with its muscular attachments and vascular relations. In this of course, they are very automatically following the arrangements of the text books. But such a course subjects a great many students to the necessity of hearing a verbal description of much that cannot in that part of the course be demonstrated by the teacher. Muscles, arteries and nerves, about which the student knows little or nothing, are called up to his imagination, and made to clothe the naked bone at will, so that the little that he sees, and the more that he imagines, are hopelessly commingled in his memory. A single lecture on a single bone, may have described in it ten muscles, four arteries, and three nerves, to say nothing of viscera fascia, &c. To the student's eye, the bone the professor holds before the class is full of meaning, but regarding all the rest,

he might aptly say, "my dear sir, I don't see it." Such a lecture could not justly be called a lecture on *osseous* anatomy. The professor is teaching *regional* anatomy; a study which only an experienced anatomist can successfully pursue. I can not help feeling a profound sympathy for those new beginners, who are thus plunged *in medias res*, at the outset of their winter's course of lectures. An old school professor, who compounds all his prescriptions, might be excused on the ground of habit, for giving his class such a medley for a dose. But we, who hold in such horror the conglomerate mixtures of the "regulars," should learn how to make science do homage and obedience to our pharmaceutical law of *one thing at a time*. All science primarily requires in its study, a rigid analysis. The truths of nature spontaneously range themselves with military exactness into order and rank, and are capable of being so studied, though together, they make one great whole. "First the blade, then the stalk and then the full corn in the ear." Nature says to the student, "analyze now and combine afterwards." And now to apply this principle to anatomy, let the teacher begin with the osseous structure, and teach it as though it had no relations whatever. Describe each bone separately, referring only to those points which can clearly be demonstrated on the bone itself. Then put those bones together and show how they are joined, to make the whole skeleton. Such a course would not require eight weeks' time for a teacher to get over the bones, as I have often seen the other system do. A skillful teacher, by this course, with one lecture a day, can, in one or two weeks, put his whole class in possession of every fact relating to this primary department of anatomy. These suggestions are applicable also to preceptors and their students. The medical novitiate should first learn osseous anatomy before he attempts a study of the soft parts. For reference, they are very properly combined in our text books, but should not be so studied.

Having tried to some extent the above plan, I am satisfied that it is not only superior in its results, but more in accordance with the true philosophy of teaching. Other matters are reserved for a future paper.

T. P. W.

CLEVELAND HOMŒOPATHIC COLLEGE, }
December 2, 1864. }

HIGH POTENCIES AMONG THE LOWLY.

Of the origin of medicine in earliest times we will not speak. It was suggested by and born of the wants of man. In the construction of a system of cure, the chief aim should be, it would seem, to meet those wants. The early school, though rude in its practice, and wrong in its tenets, adapted itself equally to the hovel or the palace. If it carried error and disgust into one, its heroic means often conferred benefit in the other. But in modern times, with the vast experience of the past to draw from and build upon, we expect to find in a reformed school the pliability—if we may use the word—of the early system, added to the highest curative perfectibility at present attainable. The school of medicine is an order of mercy and of charity, promising aid and relief to suffering man, whether clothed in gold or ermine, or clad in the rags of poverty and filth. That system which extends to the children of wealth and refinement perfect curatives, while admitting that the social leprosy and wretchedness, or ignorance of poverty, destroys the beneficial agency of their drugs, is a false system. If it has not, or if its members will not permit it to have an adaptability to all circumstances of social life, it is a weak, lying thing! The broad basis of true Homœopathy will not endure this interpretation. It offers its means of cure to rich and poor—to refined and unrefined. The administration of remedies differs as we vary in our prescriptions to the insusceptible and the idiosyncratic. The delicate, nervous girl might receive with decided benefit *nuxvomica* 200, if indicated, but would you give the heavy, unimpressible woman that may succeed her, the high potency of any remedy? Does a Homœopath sin grievously, because, believing that the poisonous odors, and impure surroundings of the dwellings of the poor would render inert the delicate high potency, he prescribes the *first, second* or *tincture*? Does he lose *caste* and professional respectability because he dares assume that the miasm underlying all our western diseases demands the low potencies to secure expulsion? We must re-model society—we must cleanse its habits and its houses of all their filth and noxious vapors—we must educate the people and teach them refinement—we must regulate all peculiarities of personal habit, temperament and disease, ere we may hope to indulge in the exclusive use of the high potencies. The

limited range of some drugs, the uncertain action of others suggest the form of their prescription. In the low, wet vallies of the Western States, *Gelseminum* acts with a certainty and a range truly magical, were it not simply curative. In higher latitudes we have had to use it in much lower dilutions to obtain results as satisfactory. But examples are without number. Visit any little town containing two Homœopathic physicians, and you will find them personal enemies, one a high dilutionist, condemning in unmeasured terms the sugar-coated Allopath, whose worst retort is a successful practice. This is a sad fact, and speaks volumes to the medical faculty. We use the high potencies—use them frequently, where we can depend on preservative surroundings and personal indications—nor do we condemn them. It is the men who make “hobbies” of a single fact or supposition, and ride them to the death, that are guilty of this discord in our ranks. Three-fifths of all diseases will be removed without the assistance of medicine, and this is a source of much error in summing up drug effects. But if we could only crush the spirit of intolerance and bigotry, that seems to grasp in its deadly embrace, so many of our brightest, highest members, and have wiser generosity and liberality in its place, our beloved school would still advance, crushing all error and sophistry in its onward march. Let our “Doctors agree to disagree,” permitting each other, while clinging to the watchword of Hahnemann, to prescribe that potency which the circumstances of the case may indicate as most appropriate, remembering that the mere size of the dose is no test of its Homœopathicity. GROMEL.

MERCURY IN THE BONES.

In the January number of the Observer I notice an article quoted from the Med. and Surgical Reporter, giving some observations of Prof. Joseph Hyrtl of Vienna, upon metallic mercury in the bones. I have personal knowledge of the second case mentioned, and can fully confirm the statement. One day, in April or May 1860, I was at work in Prof. Hyrtl's private dissecting room, when the old janitor came in with a femur in his hand, and great wonder expressed upon his face. He had been drilling the bone for the purpose of wiring the skeleton

together, and as he perforated the spongy portion of the condyles, the little drops of metallic mercury began to appear upon the drill, and drop upon the floor. The shaft of the bone seemed filled with it, and the least shaking was sufficient to cause it drop out of the perforation in the condyle. Half an ounce is a small estimate of the amount in the whole skeleton. Little could be ascertained about the young man or the disease of which he died, but even his very bones cried out against the system of medicine under which he had been so terribly drugged.

Yours truly,

JAMES B. BELL.

AUGUSTA, ME., Jan. 17, 1865.

WHAT PROTECTS THE STOMACH.—This question was discussed some time ago by Dr. Pavy before the Royal Society. He stated that the "living principle," suggested by John Hunter as the protecting agency, did not stand the test of experiment, for it had been shown that the tissues of living animals might be dissolved by the stomach secretion; the prevailing notion, he observed, that the mucous lining of the organ served as its source of protection, by its susceptibility of constant renewal during life, was equally untenable, for he had found by experiment that a patch of entire mucous membrane might be removed and food would be afterwards digested in the stomach, without the stomach itself presenting the slightest sign of attack. The view propounded by Dr. Pavy was one dependent on chemical principles. The existence of acidity was an absolutely essential condition for the accomplishment of the act of digestion.

Now, the walls of the stomach being permeated so freely as they are during life by a current of alkaline blood, would render it impossible that their digestive solution could occur. After death, however, the blood being stagnant, there would not be the resistance to the penetration of the digestive menstruum, with the retention of its acid properties, that existed during the occurrence of a circulation, and thus the stomach became attacked, when death took place during the digestive process, notwithstanding it had previously been maintained in so perfect a state of security. Dr. Pavy, in advocating this view, brought forward experiments which showed that digestion of the stomach might be made to take place during life. Whenever the circumstances were such that an acid liquid in the stomach could retain its acid properties whilst tending to permeate the walls of the organ, gastric solution was observed. The question of result

resolved itself into the degree of power between acidity within the stomach and alkalinity around. It did not appear that the digestion of living frogs' legs and the extremity of a living rabbit's ear, introduced through a fistulous opening into the stomach, offered any valid objection to his view. A portion of living stomach was surrounded by a ligature, digestion was suffered to go on, and it was found that the ligatured portion was digested, the remainder of the organ escaping.

In the case of the frog's legs, it may be fairly taken that the amount of blood possessed by the animal would be inadequate to furnish the required means of resistance. In the case of the rabbit's ear, the vascularity of it being so much less than that of the walls of the stomach, there was nothing unreasonable in conceiving that whilst the one received the other might fail to receive protection from the circulating current, on account of the disparity of power that must belong to the two.—*Dublin Medical Press.*

AN OUNCE OF QUININE ADMINISTERED BY MISTAKE.—Dr. Taussig, of Rome, relates (*Med. Times and Gaz.*) the following case of this:—"Dr. Hayler, a military surgeon, visited in barracks a soldier, suffering from a relapse of ague, and administered to him a small dose of sulphate of quinine. At the same time, he directed a man to fetch one ounce of the same remedy from the hospital, in order that he might have it in readiness for any emergency. The man received the bottle; but, supposing that it was ordered for the patient just mentioned, he took it to him. In the presence of their comrades they put the whole into a cup, adding sufficient water to make a paste of it, and the patient although he found the medicine uncommonly bitter, did not leave off until he had taken it all. Dr. Hayler, on learning that this enormous dose had been taken, at once visited the patient. The most careful investigation left no doubt of the fact; but, with all that, *incredibile dictu*, except a complete deafness and a kind of stupor, no other bad effect ensued, and no antidote was administered. He was directed to the hospital, where he remained a week under observation, and left the establishment in the best of health. The ague disappeared, probably never to return. I saw the man myself; he is a Swiss, named Albitz, aged 30, of small stature, and of a strong constitution."—*Journal of the Med. Sciences.*

MORTALITY IN THE ARMY AND NAVY DUE TO ALLOPATHIC MEDICATION.—At the recent annual meeting of the British Association for the promotion of science, presided over by Sir Charles Lyell, the great geologist, there was read a paper contributed by Mr. E. B. Elliott, of Washington, "On military statistics of certain armies." From an abstract of this paper in *The Reader*, an able literary journal, published in London, we gather the following facts:

The mortality of the United States volunteers during the fourteen months from July, 1861, to August, 1862, inclusive, was at the annual rate of 7 2-10 in every hundred men; of whom but 2 per cent. were killed in action, and 5 2-10 per cent. died of diseases and accidents.

Two per cent. of deaths from rebel bullets, and over 5 per cent. of deaths from disease and accidents. Wherever Homœopaths have had the privilege of comparing results of treatment with their Allopathic opponents, they have demonstrated that the mortality, attending their treatment, is *not one-half* that of the Allopath. Hence 2½ per cent. of above loss could have been saved if Homœopathy had been employed. The loss of life through Allopathic dosing exceeds the loss from rebel missiles of war, and yet the fatal drugging system continues to receive support to the exclusion of more rational and humane Homœopathy.

Materia Medica.

BELLADONNA AND NUX VOMICA.

*A Lecture, delivered before the *Hahnemannian Institute of Philadelphia*.

BY HENRY N. MARTIN, OF BUFFALO, N. Y.

GENTLEMEN—In my last lecture, I gave the characteristic differences between four remedies, viz: Aconite, Phosphorus, Arsenic and Sulphur, and endeavored to show that in the unmodified form and character of each, there was so remarkable a difference that no mistake could ever be made by an ordinary careful observer.

*Published at the request of the Hahnemannian Institute of Philadelphia.

As we found in the Aconite girl the enthusiast who was at one moment elated and at the next overwhelmed with sadness, so in the flow of her blood, her face changes from blushes to paleness. The analogy holds good also in sickness, for in a recumbent position her face is red, while, immediately upon a change of position to a sitting posture there is extreme paleness and fainting. She therefore belongs to the emotional type.

On the contrary, the Phosphorus man is habitually gay and elated, when depressed it forms an exception, his face is always suffused and rosy, and when diseased the redness becomes circumscribed.

Still different is the Arsenic man with his unchanging austere face, without the color of Aconite or of Phosphorus. His nature hard as his skin, his innate selfishness so impressed the vital powers that he hugs to his inmost self all the vital fluids, and always seeks external warmth or artificial heat. While the Aconite girl and Phosphorus man seek to give away their caloric, the Arsenic man seeks to retain all he has and absorb more from exterior objects. The Aconite and Phosphorus persons therefore seek the open air, while the Arsenic person seeks the warm air of the room and heat of the stove. Aconite and Phosphorus are generous, while Arsenic is selfish. If we keep the picture of each remedy in our minds, as represented by a personality—in their moral, mental and physical aspects, we can with considerable certainty, know which remedy will act with most power upon certain individuals, or rather what remedy the patient is most susceptible to.

There are, of course, many modifications of these pictures, so that it may be difficult to tell in all cases, which system predominates, still I believe that he who can best individualize the mental, moral and physical person, and at sight tell which predominates will be the best practitioner.

To illustrate, for I desire to make this point clear, as the study of *Materia Medica*, according to this idea, rests entirely upon this foundation. What is the Aconite disease? It is restless, changeable, exstatic in its delirium, laughing and singing and then weeping.

What are the characteristics of the person susceptible to the Aconite medicine? Enthusiastic, charitable, merry and exstatic. Now fresh and blooming, now pale and sad, and so when this person is sick she is liable to have Aconite symp-

toms. I mean in any ordinary acute disease, and here the great law of cure "*similia similibus curantur*" applies.

The subject of this lecture will comprise a comparison between Belladonna and Nux vomica. The persons representing these drugs will be found to differ materially in their mental, moral and physical constitutions from each other and from either of the four drugs already described.

The Belladonna person has a full, well-rounded, very red face, a snub nose, short neck, large belly, thick fat hands, short fingers, not tapered, and square shaped finger nails. He is not liable to tuberculous diseases. The almond shaped or oval finger nails always indicate a tuberculous diathesis. He is eminently a jolly individual. He likes practical jokes, especially if they are perpetrated upon others. He enjoys the ludicrous, and when he laughs he laughs all over; his face becomes, if possible, more suffused, his belly shakes and he holds his hands to his sides. He is very much coarser than the Aconite person, both in the texture of his skin and his mental functions, and desires. He is more fond of the bar-room and horse stable than of fashionable life. He is a good horse-jockey, tavern-keeper, and stage-driver, and if his desires are fully satisfied, he will own a good stallion. When he trades horses, he don't mean to get cheated; he depends on his own judgment. He has great fondness for tobacco and for spirituous liquor. He is high tempered and irascible, but generous in his impulses and cannot withstand the appeals of poverty or of his own passions, he is therefore liable to be led into indiscretions. His fondness for the opposite sex leads him to choose more from domestic females than from those who lead a fashionable life. The one who can make his bed the most comfortable and his table the most bountiful, will be the choice of the Belladonna man, for he has great fondness for home and its comforts. If his impulses lead him into indiscretions he is shrewd enough to hunt up the Sulphur man who having no character to lose, will, for a small bonus, acknowledge himself the parent, and thereby without labor or moral inconvenience get a few more dollars, wherewith to purchase his accustomed drink. The Belladonna man is far from being haughty. He is the man that we always find in the sales stables, with his hands in his pantaloons pockets, admiring good horses. As a tavern-keeper, he is the jolly Boniface, always popular and sets a good table.

All those who have read Dickens' Pickwick papers, will find a good ideal representative of the Belladonna man in old Weller, who always advised his son Samuel to "bevare of the vidders."

The best representative disease of Belladonna is scarlet fever. Here let me remark, that it has become a habit of many Homœopathic physicians to give Belladonna in every case that they diagnose scarlet fever, regardless of the symptoms, simply because it is scarlet fever. This is neither more or less than genuine Allopathic practice. If Homœopathy is true at all, it is true in all its parts, and it will cure *all* conditions of functional disease, provided there is enough of vital force left in the system to react; so when we have to use other means of relief besides true Homœopathy, it is not because the principle of Homœopathy is not true, but because we have not arrived at that state of perfection in the knowledge of the applications of the principle, to enable us to secure the desired end, without resort to external applications and to surgery. I wish it to be remembered that I say *functional diseases*, not accidents. Scarlet fever, to be cured by Belladonna, must have the whole or a part of the following group of symptoms.

Smooth, even shining redness of the skin with heat and swelling of the parts; the color is very much that of a boiled lobster, the redness is not circumscribed, but is diffused over the whole surface. Eyes sparkling red and glistening or dim according to the stage of the disease, sometimes a wild unsteady look. Headache, sometimes with loss of consciousness and furious delirium. The glare of light aggravates the eyes; pupils dilated and immovable. The mouth dry, hot and red and inflamed; tongue hot, dry and bright fiery red and glossy, with the papillæ raised, making what is usually known as a strawberry tongue. Throat dry, hot, bright red and inflamed with dryness and burning in the œsophagus and sensation of constriction in the throat. The patient cannot swallow drinks or saliva. Pulse full, hard, strong and rapid; sometimes globular, this is a characteristic Belladonna pulse; placing three fingers over the radial artery there is a feeling as though distinct globules passed under each finger.

The scarlet fever of the present day usually has raised pimples or sometimes a vesicular eruption mixed with the smooth red surface. In such cases it is useless to give Bel-

ladonna for it has no such indication in its provings. Rhus tox. would be more likely to suit such cases.

The next remedy which claims our attention, is *Nux vomica*. This man is large, powerful and muscular, neither slender nor fat. He has, probably, the most powerful nervous organization of any of the human species. He is possessed of a strong will, and is obstinate and determined. He accomplishes great results. His features are prominent and heavy. His skin is coarse, his nose is long and large and he has heavy overhanging eyebrows. He has a long upper lip and a large broad chin. His hair is coarse, harsh and dark; his eyes are dark and deep set. He has a gloomy expression of countenance, and carries his head a little inclined forward, and not erect or backward like the *Phosphorus* man. He is a hard student and a profuse thinker. His passions are strong, but when in health his strong will-power keeps them in check, provided he has grown up under proper moral influences. He is capable of being a great and good man or of being a great rascal. He is often addicted to spirituous drinks which he resorts to to stimulate his overworked brain. Of course a continuance of such habits will finally wear out his mental and nervous systems and then he becomes an object of disease and often is an habitual drunkard and loafer. He is irritable, malicious, unscrupulous and ambitious. He neither likes the bar-room or stable like *Belladonna*, fashionable life like *Phosphorus*, or the counting house like *Arsenic*, but seeks rather the management of great enterprizes or the control in politics. In this country it is the *Nux vomica* man who always wants to get into the Presidential chair.

Daniel Webster is the best ideal representative of *Nux vomica*.

The following is the most common form of *Nux vomica* disease which you will be called upon to treat.

An individual comes into your office, and before he opens his mouth his whole expression says *Nux vomica*, why, because the genius *Nux vomica* has taken possession of him and it has left its impression upon his whole being. He is taciturn. He is a hypochondriac. The first thing he says to you is, I have got the dyspepsia. He looks gloomy and is very nervous. His once powerful, nervous and mental system is broken down, by the sedentary habits common to the student or from the over-stimulus of coffee and spirituous liquors. His constitution is broken and why should he not be a hypochondriac. He

is now irresolute, time hangs heavy upon his hands; he has vertigo and staggers when he walks. He has giddiness and heaviness in the head in the morning. He awakens at 3 o'clock in the morning with confused ideas and if he sleeps again his sleep is heavy and when he awakens, he feels unrefreshed. He has a roaring and ringing in his ears in the morning. His mouth tastes sour or putrid before breakfast, which goes away after eating, or his mouth tastes bitter but his food tastes well. After eating, his stomach feels overloaded, with a sensation of pressure as though a stone was in the stomach. He has bitter eructations before breakfast and sour eructations after breakfast; sometimes nausea after eating. His food distresses him; he has water brash. The region of the stomach is sensitive to pressure. The clothes around the hypochondria and epigastrium feel tight. He has constipation with rush of blood to the head. When he has a stool, large sibilous masses come away, after great effort. He says he does not have a stool for many days, unless he takes a cathartic, and then the same hard masses come away. All his symptoms are better in a warm room and when lying down; he has continued pressing pain in the forehead. He has great liability to take cold in the head from exposure to a dry wind and from a draft of air. His countenance is pale and earthy. His tongue has a thick white coating. He has heaviness and stitches in the region of the liver. Fullness in the abdomen after eating but little. He often has a dry cough, which he calls a nervous cough. The cough is worse in the evening and in the morning. He has a great many nervous symptoms; the hands feel numb and dead. There is numbness and stiffness of the legs; sensation of paralysis in the legs with painful stripe down on the inner side of the leg. Pulse full, hard and accelerated, and the veins of the hands are distended.

Belladonna and Nux vomica both act most prominently upon the right side.

Belladonna acts most prominently upon the right side of the head, eyes, face and teeth, upon the left side of the face upon the right hypochondria, right inguinal rings, right lung, right upper and lower extremities.

Nux vomica acts upon the right side of the head, left eye, right side of the face, upon the teeth of the right side, left

side of the mouth and fauces, right hypochondria, right inguinal rings, right sexual organs, left lung, right upper and lower extremities.

Familiar Letters.

From our venerable friend ISAAC FISKE, M. D., of Fall River, (now in his 74th year), we receive the following:

"I have no hesitation in saying it is decidedly the most interesting and valuable paper, I have received among the many which have come to my hand; especially are the new provings of medicinal substances of great value to the practicing physician.

I am, from more than twenty years practice, confirmed in the opinion, that the Homœopathic system of the practice of medicine must continue to grow and spread until it becomes universal.

Extract from Letter of W. S. Wait, Esq.

We formerly suffered much; some one of our family and frequently several at once, lying upon the sick bed under Allopathic treatment, and such as recovered, were often weeks or months in regaining their wonted strength. Now, compared with former years, we enjoy an immunity from disease, and cannot be too thankful to Providence for one of the greatest blessings ever conferred upon the human family in what you and I know to be the *only science of cure*. I have respect for Hydropathy, yet injudiciously applied, it kills.

The truly characteristic and distinguishing excellence of the Homœopathic system dwells in the fact, that it is not the *quantity* but the *quality* of the drug administered, which cures. Who can save the ignorant and unreflecting from the rash pretender? and in such hands the naked, altho' strictly correct guide of *similia similibus curantur*, would be no guard against drugging the patient in quantities which might often kill. The infinitesimal dose is an effectual safeguard against this abuse.

All admit that a most important element in the science of cure, is a strict attention to diet, to which in many cases may be most profitably superadded, a total abstinence from food. The benefit of such discipline, I can not be deceived in, since my opinion upon this subject is founded upon the experience of more than half a century. I am now in my 76th year.

You may have noticed the fact, that a temporary yet rigidly observed abstinence, recommended for a particular complaint, has not only proved efficacious in the cure of that particular malady, but has proved most unexpectedly a cure to other sub-acute or less obvious ailments.

Pardon these remarks, which I only offer as a possible corroboration of your own much superior and more extensive experience in pursuing a system of cure, that is yet destined to bless the whole human family.

Respectfully your friend,

WILLIAM S. WAIT,

Dr. Lewis G. Lowe's Communication.

In New England, as you are aware doubtless, we have neither Homœopathic periodical, College or Hospital, (saving the Hospital for consumptive patients recently opened in Boston, by Dr. Chas. Cullis, and noticed in the November number of your "Observer.")

An attempt was made to have one of the wards in the new City Hospital, established this year in Boston, set apart for Homœopathic treatment, but the attempt proved unsuccessful through the opposition offered by the Allopathic practitioners.

The public, however, are in advance of the profession, in New England, in their esteem of Homœopathy, and their influence and demands will in time give it a more elevated position, and cause it to be regarded in a different light by the members of the Medical profession at large.

I have read "Hale's New Homœopathic Provings," published by you, with much interest. It is eminently practical and therefore particularly useful to a new practitioner, like the subscriber.

Yours truly,

LEWIS G. LOWE, M. D.

BRIDGEWATER, Mass., Jan., 1865.

ALLOPATHIC VENGEANCE.—During the late raid of Sterling Price, some Doctors of the Old School, connected with the plundering bands, destroyed in Gasconade, Missouri, all Homœopathic domestic cases they could lay their hands on. And a Homœopathic physician, living on the Jefferson road, had nearly all his medicines made useless. This is the magnanimity of Southern chivalry toward suffering humanity.

R. S.

Obituary.

It becomes our sad duty to announce the decease of one of the first and oldest Homœopathic physicians in the west. Dr. AARON PITNEY, of Chicago, died on the 7th inst., at the ripe age of 72 years, after a long and useful professional life.

Dr. Pitney was born near the village of Mendham, in the State of New Jersey. He was a pupil of the elder Dr. Mott, at that time the most celebrated Surgeon in the city of New York. A short time after his graduation, Dr. Pitney received the appointment of Assistant Surgeon in the army, and served in that capacity during the war of 1812. Upon the close of the war he associated himself with his brother, Joseph Pitney, of Auburn, N. Y. During his practice as an Allopathic physician, he was induced to try the alleged virtues of Homœopathic remedies, and so highly was he gratified with the results, that he visited New York city and placed himself under the teachings of the late Dr. Hull, one of the soundest Homœopaths of his time. Shortly after his return, he removed to the city of Chicago, where he arrived in October, 1842, and commenced the practice of Homœopathic medicine, fighting his way almost alone against the combined influence of his many and talented opponents of the Allopathic school of medicine. Dr. D. S. Smith was his only colleague in Chicago, and they had to contend against an opposition under which men of less will and energy might have given way.

At one time, Dr. Pitney was the subject of a public attack, in a lecture delivered by one of the leading Professors in Rush Medical College, who abused and misrepresented Homœopathy in the manner usual with that school. Dr. Pitney publicly answered this tirade in such a masterly and conclusive manner, that his opponent was effectually silenced for many years.

Dr. Pitney was a gentleman of the old regime, and dignified at most times; but withal a pleasant, genial companion to those who knew him intimately.

He was hardly at all known through our literature by his writings; but he was a skillful surgeon, a careful and practical physician. He possessed unusual tact as a diagnostician, and his opinion was rarely found to be at fault.

His last illness was a long and distressing one, and originated in a fall near his residence. His wounds, though slight, became complicated with malignant erysipelas, and he sank into a typhoid condition which no remedy was capable of reaching. Dr. Pitney was a man of most exemplary life, temperate in all things, and a consistent member of the Presbyterian Church. He leaves no children, but a large circle of friends to mourn his loss.

HISTORY OF HOMŒOPATHY IN SOUTH'RN MICHIGAN

124 CLARK STREET, CHICAGO, }
January 2d, 1865. }

To my late Colleagues in Southern Michigan:

I am about to commence collecting material for a complete history of Homœopathy in Southern Michigan (including all that portion of the State lying south of the Michigan Central Railroad). Those physicians, therefore, residing in the section alluded to are urgently solicited to send me, at their earliest convenience, the following items of information:

1. The date of arrival, death or removal of their *predecessors*.
2. The date of their own arrival at their present location.
3. Relating to their previous history, as birth place, name of preceptor, place and date of graduation, and other items of interest concerning their efforts at the introduction of Homœopathy.
4. The names of their colleagues in the place or its vicinity, etc., etc.

Any old papers, manuscripts, etc., throwing light on the early history of Homœopathy in Michigan, are solicited.

Yours, &c.,

E. M. HALE, M. D.,

Post Office Box 550.

EDITORIAL NOTE.—Our readers will observe that nearly the whole of the present number is made up of *original* articles of positive merit. The March number will be equally interesting. Prompt remittances will evince your appreciation of our labors.

BOOK NOTICES, ETC., in our next number.

AMERICAN HOMŒOPATHIC OBSERVER.

VOL. II.

MARCH, 1865.

No. 8

Proving.

RHUS-VENENATA.

Provings by Drs. W. H. Burt and P. B. Hoyt; arranged by Dr. W. H. Burt, of Lyons, Iowa; with remarks by Dr. E. M. Hale, of Chicago, Ill.

Three varieties of *Rhus* grow in this country, namely *Rhus-tox.* (Poison Oak), *Rhus-rad.* (Poison Ivy), *Rhus-venenata* (Poison Sumach).

The latter has been confounded with the *Rhus-vernix*, of Linnaeus, a species which grows in Japan. Dr. Hoyt seems to confound the two, as he refers in his paper† to the proving recorded in the Symptomen Codex, which proving was made with the *Rhus-vernix*. We have excellent provings of the two former varieties, but none of the *Rhus-venenata* until Dr. Hoyt's, which was rather a case of poisoning, for the symptoms elicited were from exposure to the contact and aroma of the plant. Dr. Burt's, on the contrary, was obtained from the tincture taken internally.

Rhus-venenata is sometimes called poison-ash, and poison-elder and Swamp-sumach. "It grows in swamps and low grounds from Canada to Georgia, and flowers in June and July. It furnishes an opaque, whitish juice when wounded, which becomes permanently black on exposure, and which may, by sufficient boiling, be made to afford a brilliant, glossy, durable varnish, very analogous to that obtained in Japan, from the *R.-vernix*.* It is much more poisonous than the other species, and its volatile principle taints the air for some distance around with its pernicious influence, producing in some persons erysipelatous swellings. The whole body is sometimes enormously swollen, and the patient unable to move." (For botanical description, see "King's Dispensatory.")

Dr. Hoyt says: "I have no doubt that its aid (?) often affects

†North Amer. Jour. of Homœopathy, Vol. VII, p. 59.

*This proving was commenced with fifty drops of the 8d dilution, taken in water; increasing the dose until half an ounce was taken at once. The mother tincture was then used. Ten drops several times a day, increasing the number up to 150 drops a day. One ounce of the mother tincture was used in making the proving. BURT.

those on whom the *Rhus-tox* has but little influence, at least this is the case with myself, for I handle with impunity the *Rhus-tox.*, while with the greatest degree of caution, I was violently affected with *Rhus-ven.*; again in using the *Rhus-tox.*, in a case of angina in which *Rhus* was almost the only remedy indicated, I had very little response from it, while from the *R.-venenata*, I obtained a most perfect victory over the complaint."

A case once came under my care which substantiates the above. A lady habitually suffered several times every year with a peculiar form of sore mouth, marked by intense redness of the mucous membrane of the tongue, cheeks, fauces, with the appearance of small vesicular points, accompanied with intense *burning* sensation, and a feeling as if the mouth and throat had been scalded. If allowed to go on, this eruption (?) seemed to extend wherever there was mucous membrane, even to the rectum and vagina. Very few remedies gave any relief, until the *Rhus* was tried, and the *R.-tox.* and *R.-rad.* had but slight favorable effect compared with the *R.-venenata*, which always removed the disease in a short time (in the third dilution).

Dr. Burt, in his proving, made use of the — dilution, repeated every few hours. HALE.

The symptoms marked H, are taken from Dr. Hoyt's proving. The symptoms marked B, are my own. Other provers are credited in their full name.

Characteristic Peculiarities. — The symptoms of *Rhus-venenata* are all aggravated just before a rain. The pains in the bowels are worse in the morning. The joints are all very stiff in the morning; after exercising an hour or so the stiffness all passed away. The pains in the ancles are worse in the afternoons and evenings. The itching and burning is aggravated in a warm room, and in bed. The ankle-joints are more affected than the other joints, but it has a great affinity for the tarsal and metatarsal joints. The symptoms are all aggravated by rest and mental labor. (HOYT.)

Skin.—The skin is hot and dry at night with great restlessness. (B.)

The palms of the hands are very dry, and the inside cuticle hard and burning hot all the time. (B. & H.)

Large fissures on the ends of the fingers, that bleed readily. (B. & H.)

Fine vesicular eruption on the fore-arm, wrist, back of the hands, between and on the fingers, also scrotum and ankles. The vesicles are situated upon an inflamed erysipelatous base, and accompanied with most intolerable itching, especially in the evening, in a warm room, and in bed; after scratching and rubbing the parts (which cannot be resisted), the itching is intolerable; large quantities of serum run from each vesicle after it is scratched. (B.)

5. Constant itching of the under lip for several days, with a bright red appearance, accompanied with great burning and itching of the arms. (B.)

Desquamation took place three different times, from all the parts affected with the vesicular eruption. (B. & H.)

Large watery vesicles on the ankles that are very painful, night and day. (B.)

The cuticle of the penis and scrotum peels off in patches as large as a sixpence. (H.)

Itching and burning of the hands, with swelling more on the palmar sides of both wrists; the swelling extends half way to the elbows; arms are very red, and covered with innumerable little vesicles, which exude a watery fluid. The hands are in the same condition. (Hort.)

10. The upper lip and ears are very much swollen, and covered with vesicles; a yellow serum exudes from them. (H.)

The cellular tissue around the eyes was very much swollen. (B.)

A boy poisoned with the Rhus-v.: his face became so much swollen that he could not open his eyes for several days, accompanied with a high fever. (B.)

Feeling as if from flea-bites in different parts of the body. (H.)

A number of boils came out on my forehead, neck, and arms, after proving the Rhus-v. (B.)

Three boils came on my face, and eight on my right thigh; one was very malignant and continued to slough for four weeks; when the core sloughed out, a cavity was left into which you might easily put the end of your index finger; when healed, they left the surface bluish-red; they were very painful. (H.)

15. Incrustations on the inside of the thighs, extending down one-half the length of the femur. (H.)

Sleep.—Great restlessness at night, with a dry, hot skin. (B.)

Great restlessness after midnight. (B.)

My wrists, ankles, and feet ached so severely I could not sleep. (B.)

Great restlessness. (H.)

Fever.—20. Chills run up and down the back when warm and in a warm room, and in bed. (H.)

Great restlessness, with a dry burning hot skin at night. (B.)

Very weak and languid. (B.)

Trembling of my limbs. (B.)

Great swelling of the head, face, and hands; with sharp irritative fever, and all the constitutional symptoms of erysipelas; the integument becomes tense, hot, swollen, shining, and very painful. (SNELLING.)

Moral Symptoms.—25. Great sadness, no desire to live, everything seems gloomy. (B.)

Absence of mind; cannot concentrate my mind on any particular subject. (B.)

Mental labor increases the pains. (H.)

Head.—Fullness of the head. (B.)

Dull, heavy, frontal headache, aggravated by walking and stooping. (B.)

30. Dizzy sensations at times, much worse in the evenings. (H.)

Intolerable heaviness of the head. (H.)

Great swelling of the head, face, and hands, with sharp irritative fever. (SNELLING.)

Erysipelas of the head and face. (S. & B.)

Ears.—Deafness, that is quite troublesome. (H.)

35. Vesicular inflammation of the ears, that exudes a yellow, watery scum. (H.)

Eyes.—Eyes half closed; eyes closed from the great swelling of the cellular tissue around them. (B.)

Constant discharge of tears. (B.)

Constant dull, aching pains in the eye-balls. (B.)

Smarting and burning of the eyes, as if washed with alcohol, (H.)

40. Burning around the right eye. (H.)

Slight dimness of sight. (H.)

Livid circles under the eyes. (H.)

Nose.—Great dryness of the nostrils at two different times, lasting each time about one hour. (B.)

Face.—Face very much swollen around the eyes. Face swollen so that the eyes were closed for several days. (B.)

45. Face very red and swollen, and covered with vesicles. (H.)

My face, and particularly my upper lip, was very much swollen, and excessively painful. (H.)

Itching and burning of the face. (H.)

Mouth.—Slimy taste in the mouth. (B.)

Salty, slimy taste. (B.)

Flat, rough taste. (B.)

Tongue coated white. (B.)

The centre and base has a white coating on it. (H.)

Scalded feeling of the tongue. (B.)

The sides of the tongue are very red. (H.)

Vesicles on the under side of the tongue, with a scalded feeling. (H.)

The mucous membrane of the mouth is very red, with a feeling as if sand was under it. (H.)

Red vesicular eruption on the gums of the upper incisors. (H.)

Fauces.—Constant feeling of irritation of the fauces. (B.)

Dryness of the fauces. (B.)

60. Distress in the root of the tongue and fauces. (B.)

Tonsils very red and congested with dull aching distress in them. (B.)

Frequent inclination to swallow, which increases the pain and distress in the tonsils. (B.)

Difficult deglutition. (H.)

Throat feeling very sore, and is very red and swollen. (H.)

Appetite.—65. Loss of appetite. (H.)

Want to drink a great deal. (B.)

Stomach.—The stomach is very much distressed after taking the medicine. (B.)

Distress and pain in the cardiac portion of the stomach and upper left portion of the umbilicus. (B.)

Distress in the stomach and umbilicus. (B.)

Abdomen.—70. Constant dull, aching distress in the abdomen, with occasional sharp cutting pains in the umbilicus. (B.)



Constant dull pains in the umbilicus, with rumbling in the bowels, and followed by a soft diarrhœic stool. (B.)

Sharp cutting pains in the umbilical and hypogastric regions before a stool; the stool relieves the pains, but does not stop them altogether; lasted two hours. (B.)

The abdomen is very much bloated, and exceedingly painful to the least pressure. (H.)

Constant rumbling and griping in the bowels. (H.)

75. Pains always worse before a stool. (H.)

Stool.—Distress in the umbilicus, with dry, lumpy, dark colored stools. (B.)

Distress in the umbilical and hypogastric regions, with loud rumbling in the bowels, followed by soft mushy stools. (B.)

Stools about natural consistence, but of a very dark color. (B.)

Severe cutting pains in the umbilical and hypogastric regions for six days, with three and four very soft, diarrhœic, black colored stools a day. (B.)

80. The pains are worse before the stools, but continue for several hours after. (B.)

The abdomen is much bloated, very painful to the least pressure, with continual rumbling and griping pains, the pains always being worse just before a stool; the color of the stool was uniformly light, or *nearly white*, varying in consistency, sometimes very thin, and sometimes more papescent. This state of things continued for three weeks, and I could not control it with any of our ordinary remedies. I finally stopped the diarrhoea with the first dilution of Junip-vir., in drop-doses. I was attacked several times afterwards with this diarrhoea, and the Junip-vir. always controlled it, and relieved the soreness in the abdomen. (H.)

Most intolerable itching and burning of the anus for several days. (B.)

Neuralgic pains in the anus. (B.)

Urinary Organs.—There was no particular effect upon the urinary organs, excepting a slight increase of urine after I had ceased to take the remedy. (B.)

Genital Organs.—85. The scrotum is very much swollen, of a deep red color, and covered with vesicles. (B.)

Scrotum swollen as large as his two fists, could not walk. Observed on a patient. (B.)

Severe itching and burning of the scrotum. (B.)

Intense itching and burning of the scrotum and penis; the burning is more severe than the itching. (H.)

The glans-penis is much swollen and very sore. (H.)

90. Cuticle of the penis and scrotum peels off in patches as large as a sixpence. (H.)

Back.—Constant dull pains in the cervical, dorsal, and lumbar regions. (B.)

Dull heavy pains in the lumbar region, aggravated by stooping down or walking. (B.)

Back is very stiff. (B.)

Stiff neck, or "crick in the neck," and rheumatic pains between the shoulders. (H.)

Arms.—95. Severe pains in the left elbow-joint for half an hour, could not move it, the pain was so great. (B.)

Drawing pains in the fore-arms. (B.)

Rheumatic pains in the shoulders and elbow-joint, worse during motion. (JAHR.)

Dull pains in the wrist and fingers, with drawing pains. (B.)

The wrists and fingers are very stiff. (B.)

100. Constant aching distress in the hands and fingers. (B.)

Hands are constantly very dry and hot. (B.)

Complete desquamation of the cuticle of the palms of the hands and fingers, three different times. (B. & H.)

The ends of the fingers have a number of cracks on them, that bleed from the slightest cause. (B. & H.)

Hands hard, rough, and tender. (B.)

105. The cellular tissue is greatly swollen, of a deep red color, and covered with watery vesicles, that itch most intolerably. (B.)

Both hands very much swollen and are very clumsy to use. (H.)

Fingers are very stiff and much swollen. (H.)

Fingers feeling as if they had been scalded. (H.)

Violent itching of the palms of the hands with watery vesicles on them. (JAHR.)

110. Groups of watery vesicles on the fingers. (JAHR.)

Legs.—Knees and ankles ached constantly. (B.)

Severe cramp in the calf of the leg at night, followed by great soreness of the calf of the leg the next day. (B.)

Dull drawing pains and distress in the knees, ankles, feet and toes. (B.)

Great weakness of the knees and ankles. (B.)

115. My ankles and feet ached so severely for eight weeks after taking the medicine, that it was very painful for me to either stand or walk, especially in the afternoon. I was compelled to lie down every afternoon. (B.)

Ankles very red and swollen, with watery vesicles all over the ankles, feet, and toes, that discharge large quantities of water. (B.)

Very large watery blisters on the sides of the feet. (B.)

Most intolerable itching of the ankles, feet, and toes, aggravated by warmth. (B.)

Trembling of all my limbs, with twitching of my muscles. (H.)

Believing the Rhus-v. to be equal to, if not superior to Rhus-tox., I most earnestly urge my colleagues to make further provings of this most valuable indigenous remedy.—*N. A. Journal.*

Practice of Medicine.

DYSENTERY.

BY F. X. SPRANGER, M. D.

In Homœopathy, we have very little of that dread of dysentery, which becomes so obstinate under Allopathic treatment. For dysentery they are obliged to charge their heavy artillery Opium pills and enemata, also morphia and quinine, and calomel which is almost the only remedy that enables them to combat that disease; still not knowing that it cures dysentery according to the law of similia. In our practice, who has not seen the most violent attacks of dysentery subside after one single dose of *Mercurius solubilis*. Every Homœopathist finds dysentery under the use of Aconite, Colocynth, Colchicum and Mercury, generally a matter of not much difficulty. But there are epidemics at times, especially in the cities, that seem to be obstinate; and cases of which we have treated similar ones, a month before with only a few doses of the usual remedies, are now quite unmanagable. In these cases the disease seems to extend itself deeper into the muscular and sub-mucous tissues of the colon, as also further up into the intestines. The fever may perhaps not be any greater, though the prostration is very marked, the pain and tenesmus very severe, the stools being more or less profuse and consisting almost entirely of blood, which is at times more like a hemorrhage. *Mercurius cor.* from 2d to 30th is usually a capital remedy for this form of the disease, but last summer it frequently disappointed me; only after administering *Hamamelis*, which stopped the discharges of blood, would it have its wonted effect and remove the tenesmus and other symptoms speedily. I had been using *Hamamelis* for several forms of venous hemorrhages, not having read of it being used in dysentery. (The famous work of Dr. Hale's, *New Provings*, not having then appeared) I gave a solution of from thirty to one hundred drops of the mother tincture, which is prepared from the leaves and bark of the root, in a tumbler full of water, in doses of a teaspoonful every half an hour. The discharges of blood soon became less and a few doses of mercury were only needed to complete the cure.

There is another form of dysentery, in which the evacuations are rather scant, consisting either partly of blood or mucus, but the tenesmus and pain being so much greater, the nervous system becomes much deranged and the tenesmus continues without intermission, causing the patient to cry out; there is also continual agitation. The fever may be very high or the pulse frequent and feeble, the extremities being cool. For this condition *Atropine* is an admirable medicine. I believe Dr. Rafka in his new work "Homœopathic Therapeutics," was the first one to recommend it for this disease. Atropine is to the Homœopathist in a great measure what Morphine is to the Allopathist, only we apply Atropine according to the law of similia and small doses will effect a permanent cure, where the old school achieves only a very temporary result with large doses of Morphine. I have always used the first or fifth dec. trituration, with striking benefit. It will sometimes only require a few doses of Mercury to wind up the cure.

DIPHTHERIA.

BY DR. MORGAN HIGHBURY.

Case reported to British Monthly Hom. Review.

R. D., æt. 42, a short, thick-set, and highly bilious person, felt a peculiarly uncomfortable sensation in his throat while attending to his duties in the city on the morning of August 6th, 1863. He returned home at his usual time and sent for me about 9 P. M. He complained of rigors, which alternated with heats; he had pressive headache; an irritable wild look; a slightly coated tongue; a blush of redness over the fauces, and pain in swallowing. Acon. 3 was prescribed, a dose every two hours.

August 7th. A.M. Is not so well: the pain and swelling in the throat have increased; the tongue is white and slightly coated; the bowels are relaxed; the urine is high-colored and scanty; deglutition more painful. To take bell. 3 and merc. sol. 5, in alternation every three hours. P.M. Not so well: has increased difficulty in swallowing; the tongue is more thickly coated; the pulse 86 and full; the skin dry; the face flushed; thirst; the saliva flows freely from the mouth; bowels regular. Continue the medicine.

August 8th. A.M. He passed a restless night, with increased severity of the symptoms. The bright red blush on the fauces and uvula is transformed into an angry bluish-red. These parts shew the presence of a greyish film, which I suspected to be the diphtheritic membrane in its first stage of development. The face is flushed;

the temples throb; he looks anxious and wild; the vessels of the conjunctiva are gorged; the pulse 97, full and bounding. To take bell. 3 and merc. iod. 5, in alternation every two hours. P.M. Is no better: the symptoms have assumed a more alarming form; his head is fixed; he stares wildly; he cannot swallow; the entire group of salivary glands are enormously swollen; the greyish film of this morning is transformed into a thick tenacious membrane, which covers the soft palate and the fauces, and encircles the uvula. The breath gives out that offensive stench which is so peculiar to, and pathognomonic of, diphtheria. To continue the bell. 3 and merc. iod. 1st trit., in alternation every half hour; and to apply a hot compress round the throat, and to paint the membrane with a solution of hydrochloric acid and water—viz., one of acid to three of water.

August 9th. A.M. He passed a terrible night; no amelioration in any of the symptoms; the tongue is thickly coated, and the membrane is spreading along the walls of the mouth. To continue the same treatment, and sip beef tea and champagne. P.M. Is about the same; continue the same treatment and nourishment.

August 10th. A.M. He has passed another trying night; the membrane is thicker and firmer; the stench almost intolerable; deglutition most painful; the tonsils so large as to meet each other; the pulse falters; the skin is dry; the bowels are regular and the urine very scanty. To continue with the same treatment, with beef tea and champagne.

P.M. Has passed a better day; the membranes came away in long fragments; the tongue is thickly coated; he swallows better. To take freely of beef tea, flavoured with good old port; to take champagne as well.

August 11th. Has had a better night, sleep visited him in snatches; more fragments came away after each application of the acid; the bowels continued regular; has passed more water. To continue with the same treatment and nourishment.

August 12th. Is still improving; passed a fair night; fragments of the membrane still come away; the tongue is cleaning from the tip; the breath is less offensive; the glands diminish in size; he swallows better. Continue the treatment.

August 13th. Continues to improve; had a sound sleep last night, and awoke quite refreshed; takes nourishment often; has but little pain in swallowing; the tongue is cleaning; and the diphtheritic deposit still comes away in shreds. Omit bell., and go on with merc. iod. 2nd trit.

August 14th. Improving.

From this date to the 22d he continued to improve daily, and left town for change of air.

TÆNIA.—Dr. C. C. Olmsted, says: "I perused an article in the *Observer* on Tænia. I have knowledge of a case treated with the pumpkin seeds followed by the expulsion of some

35 feet of worm. One piece was some ten feet long. He was treated by a Homœopath, with whom I am well acquainted."

Our April Number will contain a report of a case of tape worm, removed by Homœopathic agents, by Chas. W. Babcock, M. D.

UTERINE POLYPUS.

BY DR. DRUMMOND.

Mrs. J——, the wife of a clergyman, came under treatment in the spring of last year. For many months she had suffered from severe and repeated hemorrhage from the uterus. She had been married nine years, and had had two children, the youngest aged six; since then she had not been pregnant. The discharge first occurred at intervals of two or three weeks, and was regarded as a simple irregularity of the menstrual period, and for which no advice was sought. Feeling, however, weakened by the repeated drain, she placed herself under medical treatment, and took quinine and iron during the intervals, and sulphuric acid and opium when the flooding recurred. She persisted in this treatment for some months, but she derived no benefit from it, the floodings became more frequent, of longer duration, and of a more alarming character. By the advice of her friends, she determined to try Homœopathy, and she placed herself under my care. I found her exceedingly feeble; weak fluttering pulse, an anæmic appearance; tongue, gums and lips pale and almost bloodless, palpitation after the slightest effort, and a flow of blood occurring, with pain in the loins and hips, every two or three days. She would not consent to be examined, and I gave her *Sabina* and *Ruta* alternately every two hours. These medicines for a time appeared to restrain the hemorrhage, but it recurred during the next fortnight, and was not affected by them. *Crocus* and *Secale* were then ordered, but without avail. I very decidedly pointed out to her the necessity of an examination, and she allowed me to make one. I found the os uteri dilated, and embracing a fleshy substance, which I at once believed to be a polypus, and I determined the next day to make a more minute examination, and, if possible, remove the growth. In the meantime I ordered her to take an infusion

of a drachm of *Secale* in eight ounces of water, in ounce doses every two hours. The next morning I found she had suffered severely all night with pains which she compared to those of labour, and which had been attended by gushes of hemorrhage, leaving her very much exhausted and faint. I placed her in the ordinary position on the left side, introduced the speculum, and found that a polypus about the size of a walnut, and hanging by a small pedicle from the interior of the cervix, had descended into the vagina. I seized this with forceps without difficulty, and by a few twists broke the pedicle, and removed it. She suffered no pain, and was not conscious that I was doing anything beyond making an examination. For a few days she complained of bearing-down pains, and during this period she remained in bed, and took *Platina* and *Sepia*. The hemorrhage never recurred; she rapidly regained health and strength, and has since continued in the full enjoyment of health.

REMARKS.—This case is reported to show how very easily the source of a very serious disease may be removed, when the cause is accurately determined. There is nothing marvellous about it; the operation could have been performed by the youngest tyro in medicine, and yet a continued cause of ill-health and suffering was removed by the procedure. To a specialist in uterine therapeutics the case offers no interesting feature, but perhaps a young practitioner who is baffled with a case of uterine hemorrhage, which does not yield to treatment, may be induced to use the speculum, and may find the cause of his non-success.—*Homœopathic Observer, (British.)*

PODOPHYLLUM IN CHRONIC PROLAPSUS.

BY DR. D. G. KLEIN.

I have cured a few cases of chronic prolapsus with the Pod. p. I will cite the most important case:

Symptoms—Great costiveness, stool once in three days, with great difficulty, frequent micturition, had to get up three or four times every night; great weakness and soreness of the back, especially after washing, &c.

Prescribed Pod. p., a tincture prepared by myself, from green root, not very strong, three drops a day in six tablespoons-full of water, taken in three doses. In three weeks time the case was entirely cured, bowels regular, no difficulty with the urine, and the back strong and without pain or soreness.

Surgery.

CHARCOAL AS A SUBSTITUTE FOR LINT.

TRANSLATED AND REPORTED BY DR. A. L. DORNBERG.

At the present time of war when physicians, even in private practice, are frequently called upon to treat wounds, the following extract from a pamphlet by Dr. A. C. Neumann, on his method of treating wounds with charcoal, may prove valuable to and be received with acknowledgement by some of my American colleagues. After some preliminary remarks, Dr. Neumann says:—

“For many years of private practice, and afterwards during the eight years from 1845 to 1853, as director of the two hospitals in the city of Graudenz, Germany, with 160 beds, I have as a dressing for all kinds of wounds and ulcers made exclusive use of the charcoal, in preference to lint. I have given a summary report of my experience with regard to this treatment in Caspar's *Wochenschrift für die gesammte Heilkunde*, 1846, No. 30, and 1849, No. 42 and 43, where I have proved the charcoal to be not only a surrogate for lint, but have shown also that the former has considerable advantages over the latter. I refer to this merely, in order to show, that not only a superficial observation has incited this article, but that it is the fruit of many years' trial and experience, which have convinced me of the superiority of charcoal as an application to suppurating wounds.

The charcoal of all the different species of wood may answer the purpose in cases of emergency, although I prefer that of soft wood. It is necessary, however, that the same be thoroughly burnt and finely pulverized. This latter is an item of especial importance with wounds of large dimensions and on parts on which the patient is obliged to lie. For wounds on other parts and of a smaller size however, the use of a less finely pulverized article

may suffice. That fresh and bleeding wounds for obvious reasons exclude the use of charcoal, is hardly necessary to mention, but for all suppurating wounds, and especially the lacerated of large size and with considerable solution of continuity, the charcoal offers indisputable advantages."

This mode of applying he gives as follows:

"The whole extent of the wound, and even the parts immediately surrounding, must be thoroughly covered with the charcoal, and the cavities filled up even with the surface. Over this a compress of linen, three or four thicknesses, is to be applied, and the whole fastened with a roller or bandage. If suppuration is profuse, so as to be quickly impregnating the charcoal, a renewal of the application once in 24 hours will be adviseable. If, however, suppuration is but slight, the dressing may be allowed to remain from two to three, and even as long as eight days, before the soaked charcoal be removed. This can be done by means of a spoon, or by lightly rinsing it with tepid water, and should be covered again immediately by a fresh layer of charcoal. It must not be attempted however, to remove all the charcoal with every renewal of the application; this especially with regard to such portions which have become glued to the lips of the wound, and which do not exhibit any moisture. Only after six or eight successive applications these may also be taken off, when frequently one will be delighted to see the wound under it cicatrized to a greater or smaller extent. Charcoal being an antiseptic, its advantages over the lint are apparent, for it does not merely absorb the matter, which lint also does, but it prevents likewise decomposition and putrefaction, and while under the use of lint a frequent cleaning and renewal of the dressing is unavoidable, to prevent pain and other evil consequences. The charcoal on the other hand offers an additional advantage, by doing away with the frequent dressing, which must necessarily interrupt the granulating and healing process.

In all suppurating wounds, with hardly any exception, the charcoal exercises a soothing influence, quiets pain, favors the healing, and besides removes the disagreeable smell. And even if in some few cases the first application should cause some painful sensations, these will generally disappear with the second one."

Miscellany.

VERIPHOBIA MEDICORUM.

*Extract from Valedictory Address to the Graduating Class of
Hahnemann Medical College.*

DELIVERED FEBRUARY 15TH, 1865, BY N. F. COOKE, A. M. M., D., PROFESSOR OF THEORY
AND PRACTICE.

I purpose, then, to leave the well worn path, and invite your attention as fellow physicians to the last medical lecture it will ever be my privilege to pronounce before you. I shall describe to you a disease, not laid down in the medical books, and purposely reserved from my regular course for this occasion. It is a disease which you will most certainly encounter at every step of your professional career, and if unfamiliar with its nature and treatment, will cause you more perplexity and annoyance than all other maladies combined. It is, moreover, fatal in its character—fatal to the life of science. I propose for it the term *Veriphobia* (fear of Truth). There are, it is true, many varieties of this disease: there are the *Veriphobia Theologorum*, the *Veriphobia Judicium*, the *Veriphobia Politicorum*, the *Veriphobia Mercatorum*—all causing more or less mischief, and destructive of the very life of society. But the variety with which you will have mainly to deal, and with the eradication of which you are especially charged, is the *Veriphobia Medicorum*—the fear of Truth on the part of physicians. I assume the law of Homœopathy to be the very embodiment of medical truth. No argument can be needed to prove this to you, gentlemen, to-day graduates of the system. You must have become, in some way, deeply impressed with this fact, or you would probably have won your diplomas a little earlier, and considerably easier.

Let us pass at once, then, to the consideration of the nature and forms of opposition to this Truth, and the appropriate remedies with which to combat it. It affects, to a greater or less extent, all physicians and students of the Old School, and is malignant in inverse proportion to the amount of cultivation and intellect. Benign in character and moderate in intensity in physicians of enlarged views and liberal culture, it is especially severe in subjects of deficient mental caliber and limited educational advantages. This rule holds good in nearly all cases; there are, indeed, a few notable exceptions, but egotism and obstinacy are found to be the fostering elements in the majority of such instances. How often has it been my good fortune to treat successfully a veriphobist of this class, by an application of the simple remedy—*exposition*, followed, perhaps, by one or two doses of bed-side illustration! The first symptom of recovery is usually the exclamation, "If this be Homœopathy, I will investigate it and test it." When the

patient reaches this stage, he may be considered already convalescent, and nature may be confidently trusted to perfect the cure.

A leading Old School physician of this city—now retired from practice—who has been for the forty best years of his life a subject of veriphobia in its most violent form, remarked to me the other day, “I abandoned my large professional practice for this reason: I saw what Homœopathy could do, and being too old to learn it, I deemed it dishonest to practice an inferior system.” Said one of the best and oldest physicians in this State, in the course of a consultation, “Sir, Young Physic has the best of it. The law of *similia* is as true as the law of gravity. But I am too old to study it. I know ipecac will relieve nausea, and for years have treated croup successfully with aconite and spongia, but ‘trust in God, and keep your powder dry!’ always begin the treatment with an emetic!” I call this a hopeful case, but with strong relapsing tendencies.

An aged Old School physician of a neighboring State, on learning that his daughter, ill in this city with *phlegmasia alba dolens*, was under Homœopathic treatment, came flying here to wrest her from the clutches of such a monstrous heresy. After a consultation upon the case, he exclaimed, “Sir, I can’t understand your treatment of my daughter, but for God’s sake keep on!”

The *Ætiology* of veriphobia is found mainly in the tremendous pressure which is brought to bear upon the medical student in all Old School colleges, and upon the graduated physician by his professional colleagues, against the slightest manifestation of a yearning for *Truth*, or even respectful and gentlemanly bearing towards its adherents! The student is taught, nay, commanded, under *penalty of failure in his final examination*, to loathe and detest the very name of Homœopathy. He is even forbidden to speak of the Homœopathist as a physician! He must not even be seen in the company of the proscribed class; he must shun them as the very pariahs of professional society! He is literally forced by every agency that power and advantage can command, to abstain from anything and everything that might possibly open his eyes to medical *Truth*!

Nor is this powerful pressure wielded with less effect upon the graduate—upon him who of all others should be freest and most untrammelled. Is he suspected of the least proclivity to a recognition of medical truth? He is forthwith called upon for explanations, and if unable to clear himself from so serious a charge, is expelled from medical societies, banished from honorable offices, proscribed, spurned, detested! He must not even be known to have been in consultation with a Homœopathic physician—he may not dare to do it! At a recent legal investigation into the official sins of a maniacal veriphobist, many disciples, both of Old Physic and Young Physic, were called to the witness stand. Among the former were at least two gentlemen of undoubted learning, zeal and ability. One of them testified upon his oath that, “it is impossible for an educated man to be a Homœopathist!” and the other blandly agreed with all that his brother had stated! Now, these

men are actually sane upon other subjects, and I am inclined to believe that both of them use Homœopathy pretty extensively in their practice; they are, moreover, prime good fellows. What, then, is the explanation of so virulent an exhibition of veriphobia? It is the pressure brought to bear upon them so powerfully that they cannot resist it. With these facts before us, can we wonder that veriphobia is epidemic? The public at large have no conception of this state of things. They know that "Homœopathists" and "Allopathists" are "at loggerheads"—they term it "a quarrel"; but they little imagine the indignities heaped upon us, nor the earnestness and eagerness with which we court an investigation of our theories. There are always two parties to a "quarrel." This can be none, for we are not combative; we are ready on all occasions to meet ridicule with argument, scorn and derision with clinical demonstration. Nor would the settled policy of this institution "never to retaliate in kind," have been even so far infringed, as I am guilty of doing to-day, but for the necessity of explaining to you, gentlemen, and through you to the public, the existence and the nature of this baneful malady—the *veriphobia medicorum*. This disease, though never before honored by a name, is as old as the annals of medicine. It prevailed with violence two hundred years ago, when Moliere thus happily satirized it:

The president of a medical college, in conferring the degree of *Medicina Doctor*, administers, in a comical jargon of French and Latin, the following obligation:

"Do you swear, in all consultations, to adhere to old opinions, be they good or bad? Never to prescribe any remedies save those of the learned Faculty, though the patient die of his disease?" And after the candidate has subscribed to this, the *præses* confers the degree upon him thus:

" *Dono tibi et concedo*
Virtutem et puissanciam
Medicandi,
Purgandi,
Seignandi,
Percandi,
Taillandi,
Coupandi,
Et occidendi,
Impune per totam terram "

One would almost believe the powerful old humorist was a premature Hahnemannian. We shall say that the satire is not fully verified in 1865?

Sporadic cases of veriphobia are far more hopeful than the epidemic form. The latter is malignant, mean, despicable. Like all other Zymotic diseases, it freely propagates its own virus in its course. It is essentially contagious. In some instances, happily greatly diminished in frequency by the practice of inoculation, it infects laymen, in whom the disease, when fully developed, is alarmingly malignant and foul. In the lay variety, however, if the

patient can survive the treatment by inoculation, viz: the clinical application of his own dogma, he is generally cured, and if so, is rarely attacked a second time.

Epidemic veriphobia is now prevailing throughout the Northern States, and you will have abundant opportunities for studying and combating it. You will also have frequent occasion to observe that the epithets malignant, mean and despicable, are by no means misapplied. The subjects seem to be seized with a veritable mania. Like wolves, they are comparatively harmless when encountered singly, but in the full pack, are desperate and fierce. I am informed that a combined effort has been, or is to be made, in our State Legislature, which, if successful, will render this the last annual commencement of your *Alma Mater*! It is sought to smuggle a bill through that august body, creating a board of "medical examiners," before whom all candidates for degree of *Medicinæ Doctor* must be brought. The palpable object of this is to exclude Homœopathists altogether from the ranks of medicine, precisely as they are so successfully excluded from the army and navy. This is veriphobia in its despicable aspect. Its subjects, in this instance, are men of low and obscure origin, weak and imbecile.

"Clothed with a little brief authority," and fearful of honorable competition at the bedside, the veriphobic epidemic has so entangled in red tape and circumlocution the law makers of our land, from jocular President to dull-eared Congressman, that it has thus far excluded Truth from our public hospitals, and from our army and navy. Here veriphobia runs riot, mad, delirious. It drives a FRANKLIN from his noble work at Mound City Hospital, and finally from the army, for no other earthly reason than that he saved too many patriots from butchery!

Thank God, its fury only lifted a BEEBE to a higher and a nobler eminence!

It surrounds the poor soldier with such needless implements of torture and of horror, that the battle-field in comparison with the hospital, is justly regarded as a sanctuary. Thank God, again! the surreptitious pocket-cases have come to be as numerous as the matchlocks. "God bless them little vials, doctor—they kept me out of hospital." Who among you, my colleagues, has not been thus greeted by many a war-scarred veteran?

Who believes that justice would have been so swift and sure upon Surgeon-General Hammond, but for his famous anti-mercury and tartar emetic order? No, veriphobia shivered to its very roots, and exclaimed, "*Fiat voluntas veriphobia ruat Hammond*," and Hammond fell accordingly. It withholds the coveted commission from the educated and experienced advocate of Truth, but gives it to the blatant and pin-feathered buzzard of error. I met one day an acephalous old school acquaintance, gaily arrayed in a new uniform, with all the decorations and gewgaws which the "regulations" permit. I accosted him, "Why, how did you ever get past the examining board? you know enough to realize your

entire ignorance of medicine and surgery?" "Oh, said he, with a leer, "I only had to damn Homoeopathy pretty savagely!" A raw back-woodsman, freshly turned from some doctor factory, where they rush the machinery at lightning speed, passes a successful examination for army honors, where any of the Faculty of this College would fail!

But, as intimated, there are sporadic cases of veriphobia which so little resemble those I have described, that the similitude exists only in name. The subjects are honorable, learned, high-minded gentlemen. They are afraid of the *truth*, only because they are suspicious of *error*. They are, practically, Homœopathists. Under whatever distinctive appellation we may rank them, they are skilful as physicians, and honest as men. Blinded by the fallacy that Homoeopathy essentially consists in infinitesimal doses, they assume for granted that they never seek to verify by actual inspection. But their practice is safe: they are unwittingly Homoeopathists. Such an one is a Blake, who dared to brave *veriphobia medicorum maligna*, by declaring, in a medical society where the disease held savage sway, that the poor man has a right to Homoeopathic treatment in the army and navy, and in public hospitals, if he so elects, and was even so bold as to announce his willingness to practice on equal terms with a Homoeopathist in hospital or dispensary. Such, almost, is another who said to me a few days ago: "If you can cure puerperal fever, why don't you tell us what you give?" Poor fellow, but for his veriphobia, he would long since have gained the coveted information.

Why, it may be asked, do not the veriphobists consent to contrast their treatment with ours, side by side, in hospital and in camp? What better opportunities could be afforded them for disproving our claims than a fair comparison of the two symptoms, upon the same classes of patients, taken indiscriminately, under precisely the same circumstances, and the same surroundings? We have ever been anxious, nay, clamorous for the trial. We invite it—we challenge them to it. Can they have the effrontery to answer that they are unwilling to expose lives to our "do nothing treatment?" Witness the frightful sacrifice of lives, they are now making the world over in their insane experiments! Besides, are we not so rapidly growing in popular favor, that we are even now monopolising the great majority of the educated, intelligent and wealthy population of the country? And would it not be an actual saving of valuable lives—if, indeed are as they assert, "letting people die"—were they to seize upon so golden an opportunity of rapidly exposing our delusion. How long would it take, think you, to accumulate statistics sufficient to overwhelm either them or us with the most stubborn kind of facts, if they would, for a short time only, relax their resistance and open the doors of an honorable and fair competition in our public hospitals, and in our army and navy? Put down in this way, we should stay put down—nothing could resuscitate us, and our hated system would be heard of "never more." Gentlemen veriphobists! we invite you to this

crucial test. The people will draw the just inference from your refusal. Nay, they have already decided against you. *Populus vult decipi et decipiatur*. But just here they can be deceived no longer.

CHLOROFORM.

Recovery after taking one ounce and a half.

A young man, N. Chase, of this town, (Searsport, Maine,) about twenty-three years of age; owing to some false representation or illusion of the mind, drank at a single draught one ounce and a half of Chloroform. Immediately after drinking the drug, he sat down at a stand and began to write; after sitting about fifteen minutes, he fell over backward in a complete unconscious state.

In about two hours from the time he drank the drug he was given an emetic, which operated well. The matter that was ejected from his stomach smelt strongly of Chloroform.

This patient remained in an unconscious state thirty-six hours. During this time he had most violent convulsions, so violent were they, that from two to four strong men were required to hold him and prevent him from injuring himself. After thirty-six hours of spasms, which came on as often as once in fifteen and lasted about one or two minutes; he then became quiet and his consciousness began to return, though it was fully twelve hours before he could speak so as to be understood.

The last twelve hours he seemed apoplectic. Had you come into the room, not knowing anything of the previous symptoms, you would certainly have called the case Apoplexy. Would Chloroform be a remedy for apoplexy? In one week the patient was again about his business well as ever. The inquiry I wish to make, is why did not the Chloroform produce death? He was in a perfect state of health and the Chloroform was in the stomach at least two hours and a half, sufficient time for all to be absorbed.

POISONING WITH ACONITE. About the middle of May last my boy, aged two years and eight months, very large and fleshy, light complexion, blue eyes, very good disposition, has never been

sick, was attacked with symptoms of choking and suffocation, as if from some obstacle in larynx; said he had not swallowed anything; had nothing in his mouth. Introduced my finger into his throat to remove the substance; found nothing although it caused vomiting of a quantity of frothy mucus, but gave no relief. Symptoms rapidly growing worse; gave tepid water; vomited more white frothy mucus with no relief; much worse; face congested with a bluish appearance, pulse very quick but feeble, almost imperceptible, inability to hold up his head; violent, spasmodic, crampy cough; immediate death seemed inevitable; did not appear as if anything was lodged in larynx or trachia. What was to be done? First the cause, then the remedy. The cough indicated Aconite; hastened to the yard and found he had been picking aconite leaves. Gave Spirits of Camphor and tepid water as an antidote and emetic; vomited more frothy mucus and some small pieces of Aconite leaves, which he had swallowed; continued the above freely, in a half hour was quite like himself again. For the next three weeks he was *very feverish and irritable*, had watery discharge from eyes and nose. Nearly four weeks after had two attacks of croup (never had it before), which were quickly cured by a dose of Aconite, 200th. He did not recover his former good disposition for three months. Has had no symptoms of croup since.

A. M. CUSHING, M. D.,

February 13th, 1865.

Melrose, Mass.

FEEES adopted by the Homœopathic Medical Society of Chester Co., Penn., May 3d, 1864:

Office Prescriptions,	\$.50 to \$1.00
Visit in Town,	1.00
Visit out of Town within 3 miles,	1.00
Visit over 3 miles, within 6, each additional mile,25
Each mile over 6 miles,50
Each additional Prescription in same family,50
Services at night double fee.	
Obstetrical Cases,	7.00 to 15.00*
Surgical Cases extra.	

*This does not include visits after delivery.

These rates are not half high enough for our cities and too little for the country. Farmers can afford to pay more as long as produce sells at present rates.

A COMPLAINT.

Many physicians who report cases for the Observer appear to form a diagnosis of the disease, prescribe the remedy for that disease, and report the results of the prescription without giving any symptoms by which they were led to select the remedy, as a guide to young practitioners (of which I am one), in similar cases. It looks to me as though the remedy was prescribed regardless of any characteristic indication, or without individualizing the case. For instance in the last number there is a case of rheumatism reported, cured with *Phytolacca*. The reporter does not state in what part of the body the disease was located, nor what tissues were involved—whether bone, muscle, or ligament. I am afraid Hahnemann would become uneasy in his grave did he behold such loose prescribing. Please request physicians to report the potency of the remedies prescribed whether tinctures or dilutions, that we may have something as a guide, should we desire to use the same remedy in similar cases.

Respectfully, A. M. WOODWARD,
172 Bleecker street, N. Y.

QUACKERY IN A NEW PHASE.—Quacks are full of expedients to deceive the simple and unwary. One of the latest is that adopted by one of the genus in this city, who by some means prefixes "Rev." to his name and affixes "M.D." He rented one of the theatres and advertised sermons to be preached on "taking" subjects on Sabbath evenings, admittance five cents "to pay expenses—no change given!" In these sermons he spoke of a "physiological religion," and frequently wandered away into the fields of medical theory and practice, referring the curious hearer to "his office" for further information! It is needless to say that in this way he picked up many a patient and pocketed many a fee.

The nice little arrangement seems to have been interfered with in some way, for the theatres have been closed against him of late, and he has not been able to command audiences in less notorious localities.—*Medical and Surgical Reporter*.

GENERAL TOM THUMB, HIS WIFE AND BABY.—Mr. and Mrs. Stratton, (General Tom Thumb and his wife) have been giving receptions at Calcaldi's Hotel, Dover street, Picadilly. The General looks remarkably well, and has improved in appearance since

we last saw him. He is now twenty-seven years old. His wife is smaller than the General, is dark, with very well-defined features, indeed exceedingly pretty, good figure, and inclined to *embon-point*. Her age is twenty-three. The baby was also exhibited, which is now twelve months old, weighing seven pounds and three-quarters. The diminutive pair seem very proud of their offspring; whether it will be of the same Lilliputian stamp we cannot at present say. Mrs. Stratton's sister, aged twelve, was also present. She is smaller still than the General or his wife.—*Lancet*.

Dispensaries.

BOND STREET (N. Y.) HOMŒOPATHIC DISPENSARY.

EXTRACT FROM TENTH ANNUAL REPORT, BY OTTO FULGRAFF, M. D.

Ten years have passed away since the doors of our Dispensary were first thrown open for the reception of the sick poor. It is still located where it was founded, at No. 59 Bond street, and is open daily from 2½ to 4½ o'clock P. M. These are the fixed hours to the public, but the Dispensary is in fact open nearly the whole of every day, some one of the Resident or Visiting Physicians nearly always being in attendance, to answer the calls of the sick who find it inconvenient to come during the regular hour.

Our Branch Dispensary, situated at No. 194 East Seventh street (opposite Tompkins square,) under the charge of our able assistant, Dr. J. P. Ermentraut, is open daily from 12 to 2 o'clock, and is frequented mostly by Germans.

The progress Homœopathy is making, even among the people in the lower walks of life, is surprisingly rapid. Our patrons probably will recollect that ten years ago we treated during the first year of the Bond Street Dispensary, only 520 cases and gave about 1,800 prescriptions; but last year we reached the enormous number of 17,106 cases, and 42,765 prescriptions, and 8,067 patients were visited at their residences. These facts are, of themselves, sufficient argument and afford a suggestive contrast to the assertions, so often reiterated by the old school practitioners, that we treat our patients on a "diet of soup made by boiling the shadow of a chicken;" or, as Prof. T. Gaillard Thomas, M. D., of this city, says: "drop one drop of the tincture of Belladonna into New York Bay, or Long Island Sound, and give the agonized sufferer one drop of the mixture;" or, as still another of this class of critics says, we "poison our patients." Such arguments have but little force. They exhibit either palpable ignorance or wilful misrepresentation on the part of our opponents regarding our law of cure, "*Similia similibus curantur*." Experience proves that the more they endeavor to ridicule our system of practice, the more it prospers in the public estimation. This result is a gratification to us that both stimulates and refreshes—indeed, we relish it so well that

we have greater reason to fear a cessation of the above kind of comments than we have of the withering ridicule intended by them.

In our last year's report, we informed our patrons of the introduction of a new mode of treatment in *nasal catarrh*, and in *laryngitis* (often misnamed "*bronchitis*,"") consisting of *powdered medicines*, selected strictly according to the law of cure, "*Similia similibus curantur*," by being *blown through strong glass tubes* bent at angles varying according to the locality of the complaint—*either upon the posterior nares, or down into the larynx, trachea, or even the long bronchial tubes*. We can now speak more confidently of it, for since then, as will be observed on reference to the report, we have had a large number of that class, and the success attending the treatment has been highly satisfactory. These maladies are generally acknowledged to be of an obstinate nature and very difficult to overcome.

Familiar Letters.

CLEVELAND, February, 1865.

DR. E. A. LODGE.—*Dear Sir*: In your last number I was sadly disappointed in not seeing an account of a dinner given by the students to the Faculty of the Western Homœopathic College. Having the pleasure of attending the dinner, I could not allow such an interesting occasion to pass unnoticed. Such dinners are not without profit. They may justly be regarded as an index of the prosperity and harmonious working of any institution. The college is in a flourishing condition, numbering about seventy students this session, and a more intelligent and gentlemanly body of young men I have scarcely ever seen. The following is an account of the dinner as published in one of our city papers:

The students and their honored guests, in all over eighty, sat down to a sumptuous dinner served up by that prince of caterers, S. W. Garrett. The president of the evening, H. F. Biggar, occupied the head of the table, around whom clustered the guests. A. D. Hunter occupied the other end as Vice President. After justice had been done to the viands, the President announced the first toast which the company drank in silence: "The President of the United States." The next regular toast was, "The Army and Navy," which was responded to by Col. L. W. Carpenter and L. W. Linn. The speeches of these gentlemen were eloquent and were loudly cheered at the close. "The Red, White and Blue" was sung with fine effect by H. M. Broderick, assisted by L. F.

Crawford and N. S. Hubbell. The next toast was, "The Health of our Guests." Profs. S. R. Beckwith, Dean of the Faculty, and J. C. Sanders, responded in humorous and eloquent speeches. The fourth toast, "The Disciples of Hahnemann," was responded to by Prof. Geo. W. Betteley, in very appropriate remarks. "The Memory of Hahnemann" was the fifth toast, and received an able response from Prof. A. O. Blair. The sixth was "Canada," which received a witty response from Prof. H. C. Allen. "The Arts and Science" met with happy treatment from Dr. D. H. Beckwith. The Dean toasted the class of 1864-65, which called out the President H. F. Biggar, in a very neat and appropriate speech, after which L. F. Crawford responded happily to the inevitable toast, "The Ladies." W. M. Eddy responded in very suitable remarks to "The Science of Anatomy." "The Press" was facetiously responded to by C. T. Campbell.

Other toasts were offered and met with suitable responses. Taken in all the dinner was a very happy one. The conventional bar between professors and students was taken away, and all met on a common footing of kindly social feeling. No idea can be obtained from our meagre report of the outbursts of merriment, the fun and overflow of sympathy and good spirits. Both faculty and students will long remember the geniality of the occasion whose benefits will reach far into the future.

Yours truly, *A Friend of Homœopathy.*

Obituary.

CORNELIUS B. JOCELYN, M. D.

To the Editor of the American Homœopathic Observer.

DEAR SIR:—At a regular meeting of the Hahnemannian Society of the New York Homœopathic Medical College, the following resolutions were unanimously adopted:

R E S O L U T I O N S .

Whereas: Since the last annual meeting of the Hahnemannian Society of the New York Homœopathic Medical College, tidings have come to us of the death of our friend and brother Cornelius B. Jocelyn, M. D., who was a beloved and honored member of this association.

Resolved, That while we bow in humble submission to the

hand of Him who has bereft us, and cherish a high respect for the memory of our beloved brother, won from us by his kindly genial nature, and by the uprightness and integrity of his character, that made itself felt in all his associations, we can not but sincerely regret that his life here was cut off in the freshness of his early manhood, as it was opening up before him with such promise of usefulness in the noble profession whose ranks he had just entered.

Resolved, That in our opinion, by his death, the profession has lost one, who by his indomitable energy and perseverance bade fair to stand in its foremost ranks—and the cause of Homœopathy a friend ever true to its first interests.

Resolved, That while thus deeply regretting the brevity of a life so full of rich promise, we can but rejoice that our brother met the great change with so much manly fortitude and Christian resignation, and that he has entered upon a life which is the reward of all those who acknowledge their dependence upon and place their trust in an *Allwise God*.

Resolved, That a copy of these resolutions be forwarded to the widow of our deceased brother, Mrs. Sarah B. Jocelyn of Springfield, Mass., and also to his parents, the Rev. and Mrs. S. I. Jocelyn, of Williamsburg, L. I., as an expression of our sympathy with them in their deep affliction; and we trust that the same confidence in the *Divine Being*, which inspired our brother with hope and peace during his last moments will sustain and console them.

Resolved, That copies also be offered to the editors of the North American Journal of Homœopathy, the American Homœopathic Review and the American Homœopathic Observer, for publication, and that they be recorded in the society minutes.

P. OSCAR C. BENSON,	} Committee.
B. F. BOWMAN,	
W. F. HOCKING,	

Book Notices.

THE THERAPEUTICS OF RETROFLEXION AND RETROVERSION OF THE UTERUS. By E. M. Hale, M.D., Author of *New Proving*s, &c. Chicago, C. S. Halsey, 1864. For sale at Detroit Homœopathic Pharmacy. Price 30 cents.

The author of this *brochure* has the happy faculty of selecting those subjects for his versatile pen, which are most interesting to

the Homœopathic physician. The success of his work on the new remedies is such that the profession will grant him high praise for efforts to extend our knowledge of materia medica and therapeutics.

The subject of retroflexion and retroversion of the uterus has scarce been mentioned in our literature. Dr. Madden has a paper on Flexions of the Womb, which appeared a long time ago in the British Journal of Homœopathy, and Drs. Preston and Shearer have short articles in Vol. I., of the Philadelphia Journal, relating to retroversion. It will be seen that our knowledge of the Homœopathic treatment of these diseases has been very limited. Dr. Hale's monograph sets forth in a brief but plain manner, the proper mechanical and medical remedies to be used in these affections, and the subject is fully illustrated with plates of the instruments used in rectifying the abnormal position of the womb, and retaining that organ in normal position. We know of no work of its size more likely to impart instruction, to prove more valuable than the pamphlet before us.—*N. A. Journal.*

THERAPEUTICS OF THE DAY, in a series of letters, by Dr. WILHELM STENS, Sanitary Councillor of his majesty the King of Prussia, and Physician in Ordinary to H. R. H. Prince Albrecht of Prussia, translated from the German with the special permission of the author, by Henry St. Clair Massiah. Second edition, revised. London. I. Wertheimer & Co. For sale at Detroit Hom. Pharmacy at \$5.50.

A beautifully printed octavo of 344 pages, containing twenty letters with the following titles: 1. Physiology—Generation—Breathing—Digestion. 2. Formation and Dissolution of Matter. 3. The Nerves—Retrospect. 4. Pathology. 5. Materia Medica. 6. Therapeutics—The Antipathic or Revulsive Method. 7. The Physiological Method—The Materialists. 8. Inflammation—Theories and Treatment of the same—The True Science. 9. Discovery of the Homœopathic Law of Cure—Rules for Experiment. 10. The Materia Medica of Homœopaths. 11. The Pathology of Homœopaths. 12. Therapeutics of Homœopaths. 13. Historical Evidence in favor of the Principle of Similarity. 14. The Theory of the Dose. 15. The Minute Doses of Homœopaths. 16. Results of Homœopathic Practice. 17. History of Homœopathy—Hahnemann's Life and Labors. 18. Details as to how Homœopathy is combated, and refutation of the objections adduced against it. 19. The Self-Dispensing of Homœopaths. 20. Survey of Homœopathy—Its Position—What have Homœopaths to do?

The author's preface is quaint and pungent, "Go into the world my book, and do thy duty as I did mine in writing thee. Thy bed

will not be of roses; but fed on the marrow of facts; thou possessest the courage and strength that are required to combat worthily and perseveringly in the great battle of truth. I am convinced that neither praise nor contempt will make thee deviate from the path on which thou art destined to lead suffering humanity to health; for thy intentions are of the finest and noblest, and thou carriest with thee the most approved and efficacious of remedies."

Notwithstanding all the improvements in the sciences of chemistry, physiology and pathology, there has been no corresponding advance in Allopathic Therapeutics. Our author directs us to the indestructible supports of true Therapeutics, viz: Physiological Materia Medica, pure objective Pathology, and the maxim *similia similibus curantur*. — "There is no question here," he says, "of superficial comparisons between the symptoms of the drug and those of the disease; but that both must be understood organically, and compared in their bearings; that therefore a picture must be drawn both of the disease and of the remedy, and that an organic diagnosis must be founded thereon, a proceeding which presumes the profoundest knowledge of Ætiology, Semiotics and Diagnostics, in a far higher organic sense than usually."

We can commend this work to our friends as one of rare merit.

HOMŒOPATHY SIMPLIFIED, or domestic practice made easy, containing explicit directions for the treatment of disease, the management of accidents and the preservation of health by JOHN A. TARBELL, A. M., M. D. Revised edition. Boston, Otis Clapp. For sale at Detroit Homoeopathic Pharmacy, at \$1.75; to physicians at \$12 dozen.

The author assumed that only simple forms of disease would be subjected to family prescribing, and therefore prepared a manual calling for the use of some 46 well tried remedies. The medicines are enumerated according to their degree of usefulness and placed in such relative prominence as to secure their ready selection." This book therefore avoids "the embarrassment and dissatisfaction almost certain to result from the perusal of several pages of reliable and unreliable, important and unimportant pathogenetic symptoms, which are recorded in confusing groups and unattended by any well defined matter of distinction."

We notice that Dr. Hill's recommendations of Baptisia, Macrotin, Podophyllin, etc., etc., as Prophylactics are copied from his epitome of the Homoeopathic healing art.

night; A Physiological Classification of food. This portion of the work is invaluable. It is an available rendering of the whole subject. Much careful analysis and thought are requisite in order to write so succinctly and so perspicuously. When treating upon such topics, of which so much has been written, the question is not what one shall say, but rather what he shall not say. It is a rare merit to pause when enough has been said. The chapter upon "General Principles," will not mislead or weary the reader, and is by no means the least important and valuable department of this excellent work.

The arrangement and classification of diseases is as follows: 1. Acute; 2. Chronic; 3. Sporadic; 4. Epidemic. Class I. Diseases of the Digestive Function; II. Do. of the Respiratory Function; III. Do. of the Circulatory Function; IV. Do. of the Nervous Function; V. Do. of the Reproductive Function; VI. Do. of the Secernent Function.—*Extract from Review by Prof. Ludlam, in N. A. Journal.*

AN EPITOME OF THE HOMŒOPATHIC HEALING ART, containing the new discoveries and improvements of the present time, designed for the use of families and travelers, and as a pocket companion for the physician, by B. L. HILL, M. D. Revised edition.

The publication of the revised edition of this work has been delayed by causes beyond our control until the present time. It is now printed, and before the issue of another number will be mailed to our subscribers. It has been printed in good clear type, and yet so compactly that in a less number of pages than the old edition it contains at least one-fourth more matter.

We will forward the Epitome, by mail prepaid, as a premium to any of our friends who will send us the name of a new subscriber for the Observer with the subscription for one year \$1 50.

MANUAL OF HOMŒOPATHIC PRACTICE, FOR FAMILIES. By J. S. Douglas, M.D., of Milwaukie. For sale at Detroit Homœopathic Pharmacy—paper covers 40 cents; bound 50 cents; extra binding 60 cents.

This little domestic work is especially designed for the use of families, travelers, and persons residing at a distance from their medical advisers. The book is characterized by conciseness, accuracy, and clearness in the description of diseases and the selection of appropriate remedies.

There are but few Homœopathic physicians in this country who so thoroughly understand the true scope and genius of our *matéria medica*, as our friend and co-editor, Doctor Douglas. It was to be

expected, therefore, that any work of this kind from his pen, would possess unusual practical advantages.

For families in sparsely populated districts, or for persons on ship-board, a medical guide of this kind is calculated to be of essential service, and we take pleasure in commending it.—*N. A. Jour.*

A NEW AND COMPREHENSIVE SYSTEM OF MATERIA MEDICA AND THERAPEUTICS, arranged upon a physiologico-pathological basis, for the use of practitioners and students of medicine, by CHAS. J. HEMPEL, M. D. Second edition, revised and considerably enlarged. 2 vols. \$12. Wm. Radde, N. Y. For sale at Detroit Hom. Pharmacy.

The first edition of Dr. Hempel's work (1500 copies) sold rapidly; it was reprinted in London, England, where it was received with favor. A second edition has been in request for some years, and we are happy to announce that it is now ready.

Dr. H. says:—"The reader will find that the second edition has been greatly improved and considerably enlarged by the addition of new remedies, and by a more careful elaboration of a number of the older remedies, to which a rather short space had been allotted in the first edition of this work."

Prof. Hempel has enriched our literature by a very large number of excellent translations and several original works, the most valuable of which is the System of Materia Medica now before us. In a future number, we expect to devote space for a more extended notice of this book.

THE HISTORY AND HEROES OF THE ART OF MEDICINE, by J. RUTHERFORD RUSSELL, M. D., *with portraits*. London. John Murray. For sale at Detroit Homoeopathic Pharmacy. Price \$10.00.

The history of medicine at different periods of the world's history is presented by the author in a very readable book. The prominent physicians of each age are noticed, and their systems brought under review in an able manner. *Æsculapius*, Hippocrates, Galen, Avicenna, Dioscorides, Roger Bacon, Cardan, Paracelsus, Lord Bacon, Van Helmont, Henry, DesCartes, Sylvius de la Boe, Boyle, Sydenham, Stahl, Hoffmann, Boerhave, Haller, Cullen, John Brown, Jenner, and lastly *Hahnemann*. The 76 pages of the work, which are devoted to Samuel Hahnemann and the homoeopathic practice, contain one of the best presentations of the man and the practice that are to be found in our literature.

TRANSACTIONS OF THE HOMŒOPATHIC MEDICAL SOCIETY OF THE
STATE OF NEW YORK, 1864.

Our colleagues of the Empire State have got a "good thing." Their Allopathic friends (?) procured from the Legislature of that State, "An act to incorporate the medical societies for the purpose of regulating the practice of physic and surgery in this State." Under this act they formed county societies and a state society, and anticipated thereby to "regulate" Homoeopathy out of the state. But the Homœopathic physicians of New York, also formed a State organization, and it was incorporated by the Legislature, and vested with all the powers and privileges of the State Allopathic Society. By virtue of this law, the yearly "transactions" are published at the expense of the State. New York has made a precedent in this matter and we should be on the alert in other States, to seize upon the opportunity above offered, to obtain the same privileges as the Old School. This volume is a fine octavo, well filled with practical and valuable matter, and reflects credit upon the many contributors of the various organizations tributary to the State Society.

For a frontispiece, it has a fine engraving of the late B. F. Joslin, M.D., L.L.D., a memoir of whom was published in vol. 1 Transactions, (1863)

The contributors to this volume are men well known to the profession, among them are Dunham, Wells, Smith, Bowers, Watson, Paine, Couch, Raymond, Boyce, Gardner, Robinson, Beakley, etc.

The most noticable articles are two papers on cerebro-spinal meningitis; three on Diphtheria, toxicological effects of Ergot, (this is an exceedingly valuable paper), Infantile marasmus. The microscope in pathological investigations; relation of pathology to therapeutics. One very elaborate paper by Drs. Paine and Watson, is particularly worthy of mention; it is a monthly summary of prevailing diseases in connection with a similar summary of meteorological observations during the year 1862. They propose a new nosological classification of Diseases.

The proving and clinical remarks on apis, should be studied. The historical sketches of the progress of Homoeopathy in the different counties and cities of New York, are of great interest.

H.

Lectures.

AN ADDRESS

Delivered before the Meeting of the Central Society of German Homœopathic Physicians, held at Brunswick, Aug. 1864.

BY THE PRESIDENT, DR. FIELITZ.*

HONORABLE GENTLEMEN !

"We can never exercise any power over Nature save when we obey her laws."

This axiom appears, at first sight, to be somewhat paradoxical, proceeding as it does from the mouth of one of the most thorough-going opponents of our school;—one, however, to whom a noble homœopathic falcon has already displayed his talons. The axiom involves such a deep truth, that we may venture to hold it as the most important rule in the art of healing. Truly has medicine been styled a science of Nature, a science of discovery. Its aim is the investigation of Nature's laws, its product is experience. It must search for Nature's law; that alone must it follow, to that alone must it be subservient. Outside the law of Nature, beyond the law of vitality, science has no authority; than their investigation, no higher purpose. The fundamental object of Nature is production and reproduction; it is life itself, which, in a regular cycle, according to eternal laws, produces, disintegrates and reproduces itself by its own processes—protects and preserves its productions according to the same laws. An ancient Greek of world-wide renown has said that "a living being works for a definite purpose, that purpose being the possession of life itself." This biological process is manifested in each organism just in the same manner as it presents itself throughout the universe. Through the physiological function, this biological process is constantly endeavoring to maintain itself in a normal state, to balance the abnormal and ever varying conditions to which, from its susceptibility to

* For the translation of this eloquent and suggestive address from the *Allgemeine Homœopathische Zeitung*, Nos. 16 and 17, Band 69, we are indebted to Mr. Nankivell of Penzance.—*Dr. Ryan's Monthly Hom. Review.*

external injuries, it is exposed;—these abnormal and variable conditions we style diseases.

Both vital processes—viz., the preservation of the normal and restoration from the abnormal state—are at all times and in all cases subject to the same biological laws, proceed according to the same physiological development. The compensating and regulating action of the organism, through which it preserves its own integrity, is properly speaking the healing element in disease, it is the *vis medicatrix naturæ*, which, according to the law of antagonism, endeavors to resist external injuries.

Disease has been termed simply a process of healing. This is illogical. In disease a process of healing certainly takes place, but that alone does not constitute disease. Disease involves the presence of several factors, viz.: 1st, the external injury; 2d, the anomalous influence of this upon the organism; 3d, the action and reaction of the organism; and 4th, the antagonising and regulating action of the system which constitutes the process of healing.

The regulating functions does not always bring about a restoration of the normal state, but the overpowering character of the morbid condition and the pre-existing weakness of the organism combine to effect an utter destruction of health—in other words, death takes place.

From this, then, we infer that, just at the moment when Nature is in danger of being overcome, there is besides the healing process set up by Nature, another power offered to preserve life, viz., *scientific medicine*.

If, then, scientific medicine is to control the diseased organism, it must be subject to vital laws.

Now we know that, than the law of Nature there is no higher law by which life is preserved and protected, consequently the only rule on which the art of healing can be founded, must be that law of vitality, that eternal organic order, by which the organism endeavors to maintain its integrity against all sources of disease.

Art must heal as Nature heals. Scientific medicine must elicit a reaction against the action of the *causa morbi* similar to that which the natural antagonism of the diseased body seeks to effect by means of his own biological laws.

Scientific medicine accomplishes this end in two ways: 1st. By acting locally on the organ diseased by means of the specific action of a medicine influencing that particular organ, thus concentrating the vital activity of the whole organism upon it; removing disease by exciting a local reaction. 2d. Influencing the whole organism by the general action of the same remedy through its primary or secondary actions, in order to further the change which cannot be brought about except through the efforts of the whole organism, including those parts which are unaffected by disease. For physiology alleges that “both disease and its cure can only become possible so long as a certain portion of healthily acting parts retain their full vital energy.”

Consequently the scientific treatment of disease—that which is in harmony with Nature's laws—is simply the co-operation of the powers of medicine with the *vis medicatrix naturæ*, effected by the principle of similitude. We have termed the art of healing, in accordance with Nature's laws, founded on the basis of the principle of similitude, the medicine of dynamic reaction. We do so in order to distinguish it from and compare it with other methods of healing. Every cure *must* be effected by means of dynamic reaction, and no medical treatment can be effectual save through the co-operation of all the organs of the body acting harmoniously, whether this be manifested through the nerves of sensation, or through the ganglionic system; consequently there is *no other* scientific method of cure in harmony with the laws of Nature. All other principles of treatment which are not connected with the *vis medicatrix naturæ* do not harmonise with the efforts of the organism, they are aloof from and opposed to it.

It is well known that the course of disease consists in an alternation of symptoms of action and reaction (the dominance of disease and the reaction of the organism against it), so that the most acute diagnostic skill is requisite to distinguish the signs of disease from those of reaction. Indeed it is often impossible to trace the line separating them. It necessarily happens then, that an *pseudo medicine* destitute of principle, which to give greater prominence to physiology merely waves its flag at *subjective* symptoms, but takes the field in great force against those which are *objective*, must fall into a state of extreme perplexity, when in the heat of the battle it is compelled to direct its batteries against both friends and foes—against symptoms of disease and symptoms of reaction.

Some have endeavored to establish in an illusory and unphysiological manner the existence of other principles of cure and of science of healing. Such persons have maintained, that the attempt to suppress disease by acting on an exclusive principle is not admissible; that in a general sense no universal principle of medicine can be allowed; and the authority for various methods of healing has been invoked by saying that, as the human organism avails itself of various ways of obviating anomalies which have intruded themselves, so there must be various scientific modes of curing them. But this is altogether an erroneous conclusion. For all efforts of the body to recover health, emanate from a general vital law operating both in normal and abnormal states of the body. Each function of the organism, each vital action, is subject to the control of one central organ. Every reaction is accomplished through the nerves of the central organ, every crisis in the elimination of disease is invariably brought about through the influence of the ganglionic system and the physiological laws regulating it. The various attempts at restoring health, therefore, which Nature is said to imitate, and from which some pretend to derive different systems of treatment, all are invariably the result of the action of one and the same central organ, owe allegiance to one and the same

vital law, have one and the same end in view; and it is impossible to establish different methods of treatment from the various reactions of the central organ, reactions varying according to the localities in which they occur. This general vital law is the only guiding-star of scientific practice. Scientific medicine, by acting in unison with natural laws, closely follows, in the remedies it suggests, the effects of the organism; as a great physiologist has beautifully remarked, "it consists in a thorough individualisation of every case, it demands an analysis of each conducted with the closest attention, and a selection of remedies, not in conformity with a nosological system, but according to the essential peculiarities of each." And, let us add, it also requires a complete comprehension of the entire morbid process to select the remedy which in the similarity of its action corresponds thereto. With the form of the disease we also obtain an insight into its character; for the form is the manifestation of character—it is, so to speak, that side of the disease which is presented to the physician. The form, the display of its nature, however subtle this may be, must be thoroughly understood by the homœopathic physician; for very truly does the philosopher of Königsberg remark "that we do not actually know anything itself, but are only conscious of the impressions thereby made on our own senses, and that through this contemplation the real character of things can never be fully understood."

The silly childish derision of all subjective symptoms in diagnosis is a contradiction of which physiologists are not seldom guilty. It is an outrage against the law of nerve-physiology which tells us "the subjective sensation, that of which we are conscious, the pain, arises from the nerves of sensation, through sensation objective states discover themselves, consequently the expressions of disease thus produced must be regarded in diagnosis as much as the objective symptoms."

The law of *similia*, then, can be carried out even when the essential nature of the disease is unknown, can be made available beyond the limits when exact observation is possible. This law depends for its development on the expressions, the external appearances of processes which are hidden from our view.

Since the principle of *similia* allows us to keep parallel *only* with the morbid process, the most irrefragable logic assures us that the homœopathic system harmonises in its *modus operandi* with the various ways of which Nature avails herself in counterbalancing morbid conditions, and when fully developed it will render all other current methods of cure superfluous.

Through this the homœopathic system, the natural science of healing, will always be accurately distinguished from an pseudo-medicine. Hence the contempt which has been hurled at homœopathy will ever remain a singular instance of ethics in the science of medicine, a dark spot on the purple mantle of legitimate state medicine, a spot ever becoming more conspicuous the brighter the truth of homœopathy shall shine into the dark chasm of therapeutics.

We must allow as some excuse the naïve confession of a renowned physiologist, who assures us that "it is most difficult for men of learning who have obtained a high reputation to sacrifice to the progress of knowledge their preconceived opinions, and adopt fundamentally new views." Contrary to this, another physiologist says, "that which is novel always appears dangerous whilst its novelty remains, but true science is inconvenient and hostile only to that which is false and arbitrary, the human dogma."

We are aware, besides, that homœopathy has to many a metaphysical appearance; and a poet tells us that metaphysics are not adapted for the brains of all men, and let us add, seem not to be adapted to those whose brains are eaten up with ambition!

Hence has it arisen that homœopathy has continued to the present time a victim of the proceedings of antiquated institutions and privileges, a victim of the ill-will of corporations, of university monopolies and the hereditary wisdom of professors, regarding the possessors of which Holy Scripture says, "They thinking themselves to be wise have become fools."

Here they have erected splendid buildings for the professors of chemistry, there they have built pathologico-anatomical palaces for death; but elsewhere they have endeavored to put the strait-jacket of medical police over the attempt to cure in accordance with the life-giving laws of Nature.

But we need not wonder at the fortune of homœopathy; it is entirely in keeping with the spirit of an age in which an ultramontane dignitary of the church could, into the very grave of the most eminent naturalist of our century, cast against him the charge that he was a "destroyer of souls." This dissension in natural science belongs to a period when man preferred the Devil himself as a professor-ordinarius in natural history; endeavored to obstruct or stop the inconvenient laws of Nature and turn back the pretensions of offensive natural science.

Where the freedom of science is persecuted and art is handcuffed, where Bœotians assemble in the chambers of our German representatives, and in parliamentary style sit in judgment on what they term the "scientific nonsense" of homœopathy—there is not so much as freedom of thought.

For such a complicated *plica polonica* of the judgment we can really find no simile; but one well acquainted with that disgusting disease at Cracow suggests a remedy, an antipathic remedy, it is described as "combing and shampooing."

For more than a thousand years, the medical Ahasuerus has wandered from one system to another in search of a reliable principle of cure; since the memory of man state medicine has adopted the teaching sometimes of one school, sometimes of another, and to this day even the dominant physiological school itself has not yet announced any therapeutic principle of Nature's production.

The principle of cure is the basis of all therapeutics. But even after the unveiling of the topmost peaks of physiological medical science, the Berlin Coryphæus of cellular development himself has

yet to elaborate a rational therapy, and the celebrated physiologist of Dresden has declared "that hitherto physiological medicine is nothing better than a variegated web of facts, opinions, observations and fancies which have been woven together by all sorts of poetical conceits, and the lumber of high sounding words." We all remember that physiological medicine opposed itself to homœopathy as the true and rational medicine, and now we see how discreditable it has rendered the principle of rationalism.

Notwithstanding this frank and at the same time deplorable testimony regarding medical science, as it has hitherto existed, the physiological gentlemen even of these times have again so entangled and fastened themselves in the net of their cells and tissues, that overwhelmed with the multitude of these cells they cannot find the real want of their peculiar medical science, indeed neither here nor there have they once succeeded in realizing it. But this desideratum is a therapeutic principle necessary to the cell and tissue cure becoming really practical.

It is rumored that such a cell and tissue therapy is to be looked forward to, founded on this biológico-pathogenetic axiom—"life is the activity of the cell, its peculiarity is the peculiarity of the cell. The essence of disease is in an altered cell; the cell, the condition, the disorder, the injury of the cell is the first cause of every disease, of every abnormality."

If it is not presumptuous to inquire, whence comes all this elementary matter with its chemical and physical forces, of which everything is composed—so must it be permitted to ask regarding the origin, the primary cause of the disorder in the elementary organs and of the abnormal state of the tissues in the human organism, in order that we may be able to treat those parts with any degree of success. But should the hydrogenous, *i. e.*, the hydrogen and carbon of morbid conditions assert their pathogenetic importance, still a disordered state of the cells would not yet be the *ultima thule* of pathology.

It remains for us to consider in this place that these constitutions cannot all be regarded under one definition, since the transitions which Nature effects are very subtle and closely connected. Whether a classification according to those fundamental characteristics of the constitution, and a division of medicines into nutritional and functional can be made to harmonize with the principle of *similia*, can be proved neither by induction or mathematical philosophy, but must remain for future experience to verify.

If a disordered and morbid state of the cells, brought about by causes *ab extra*, is the foundation of all diseases, then indeed the infinitely varied form in which medicines act on the healthy body, —their physiologico-pathogenetic effects can be nothing more or less than a deranged state of the cells and of the tissues, as indeed pathological anatomy has already proved. Medicines or poisons when introduced into the organism in certain doses hold the same relation to it as do the causes of natural disease, and they sustain this relation only in so far as they are medicines, and in this latter

quality they heal just those disorders of cells and tissues, the similitude of whose forms and manifestations they give rise to.

Here, in practical relation to the cell and tissue theory, the truth of the homœopathic principle stands out afresh, for it is adapted to all physiological rules, when these are founded, not on a merely conjectural origin, not in supposition or imagination, but on the basis of Nature's laws.

Very recently a candid, impartial and highly intellectual non-homœopath has found that homœopathy "in relation to diseases originating in a disturbance of the circulation confirms and corroborates itself in a remarkable manner."

If we are not content to go half way, but press forward into the regions of medical discovery, we meet with an avowal of the manner of the direct operation of our medicinal forces on the elementary organs and on the cells; and we not only recognise the pretensions of materialism, but we also support the so-called spiritualism, and its direct relation to nerve substance and proper number of their divisions; thus will the elastic line of homœopathic healing power be extended far and wide in all directions, and the homœopathic art of healing must and will everywhere receive justice, where now, if only in certain places the organ of celebrity shall have become decayed. Then also will the time have arrived when the lists of learning will be opened to medical celebrities and their capacity. The celebrities will then not only press forward in the true spirit of the principle of similitude, for "Nature unlocks herself to the thoughtful investigator," but they will make clearly understood the sharpest point of criticism—the necessary consequences of this principle; it will be evident to them that a system of medical treatment that will certainly and promptly operate on the morbid process, and will introduce its remedies into the organism in a manner which completely corresponds with the physiological laws of the organism; *i. e.*, it will introduce the particles of medicine into the organism in an atomic state, and in such a manner that they can by their endosmotic and exosmotic circulation enter into the absorbing papillæ of mouth, from the papillæ pass into the capillaries, from the capillaries into the veins, from the veins into the vena cava, from the vena cava into the general mass of blood, and with the blood, according to the law of its diffusion, to the enemy itself—to the mass of disease itself. And thus, the atoms of medicine, taking the same course as the sixty billionth cell corpuscles, in accordance with the cycle of primeval order, will pervade the system, reaching the elementary organs and tissues of the body, which are certainly not a sieve through which a two-grain pill can be made to pass! Such atomic doses are not affected by any of the complicated metamorphoses laid down in the formulæ of our professors as taking place in the stomach by digestion, by chemical changes and separations in the blood, by the reciprocal decomposition and metamorphoses taking place in the body, and in absolutely unknown intensity.

By a true physiologist the atomized, potentized, dynamized,

disclosed, attenuated form of our medicines must be recognized' whatever may be the name by which men may choose to characterize this condition of them; yea, more, the essential spiritual operation of them upon the terminations of the nerves, and through the centripetal fibres upon the centre, should, I say, no longer remain an enigma; no more an enigma than the extreme waste of force in massive doses of physic, doses which cannot be assimilated, are inactive, and, luckily, oftentimes without results; these take the way of all flesh through the body and are found again useless in the urine.

It is now time, and homœopathy has directed attention to the subject, that the numerous junior members of the physiological school should pass from the unbounded confidence they have in their unfounded theories, to a clear understanding of the manner required by nature, and the physiological routes by which remedies must and can reach the utmost limits of the organism.

It is a fact very remarkable, and exceedingly satisfactory, that we so often find in the ranks of our opponents, triumphant involuntary defenders of our law of healing. A Coryphæus of the physiological school says, "Nature without properties, without force is nothing. Whether we like it or not, we may reduce a substance to an extreme tenuity so as to think it immaterial, to such a tenuity as man only is capable of effecting; yet it nevertheless remains a substance, and if this substance is to elicit the most manifold actions, so is it little else than a spirit, an essence organically furnished. It is a *Spiritus Rector*."

A good lesson this for the obstinate chemical philosopher and abolitionist of all biology.

We are here merely of the opinion, it may be, that this *Spiritus Rector* would not have space enough if we attempted to confine it within the limits of a body the size of a poppy-seed; we must allow the substance a more capacious vehicle, although not so large as a marble basin, in order that we may satisfy to some extent our rationalists and sceptics.

He goes on to say:—"Chemical bodies deposit themselves in those parts to which they belong, or else they become moved thither by other bodies; but no force of a heterogeneous nature enters this most delicate mechanism without disturbing it. Every thing strange and foreign will be an obstruction."

Words which should indeed be treasured up in the hearts of compounders of mixtures! It does not require a sneer to prophesy that homœopathy with her *Materia Medica* founded and erected on a physiological basis, so soon as it shall have been freed from reserved, mysterious management, will be able to establish a cell and tissue therapy sooner than its discoverers, to whom *two trifles only* are wanting, viz., a profound approximate knowledge of the remedies; and then *only a principle*, that these may be made available in a practical manner for the restoration of cell and tissue derangements.

Let us do ample justice to the iron industry of, and the praise-

worthy results obtained by the physiological school in the sciences auxiliary to medicine; let us frame dithyrambics to the immensity of their acquisitions, let us regard these acquisitions as the inalienable property of every accomplished physician; yet must we protest against the statement of the *Allgemeine Medicinische Centralzeitung*, to the effect that twenty-five years ago practical medicine celebrated her most brilliant period in the production of Skoda's work, the importance of which was admitted by all, and actually marked an era in medical history, that from this work was dated that renown of which modern medicine is so proud. Far be it from us to wish to detract from Skoda's renown, but diagnosis, the glory of medical discovery, is very far from being the art of healing; the brilliant point in practical medicine is a system of therapeutics in harmony with Nature's laws, elevated through diagnosis;—just such an one as homœopathy has procured for science during the last fifty years.

Therefore homœopathy carries off the lion's share of the reputation of practical medicine.

Moreover, we cannot admit, and shall ever oppose as earnestly as possible, that homœopathic medicine—a system in complete harmony with natural laws—should ever become subject to the so-called physiological school; unless this school with its auxiliary sciences should submit to the laws of pharmaco-dynamics, and the therapeutic principle of homœopathy. This then after all would perhaps be the most pardonable compromise for both divisions of medicine, and the result would be an universally acknowledged scientific system of medicine based on Nature herself.

Finally, we reproduce the words of an eminent and impartial philosopher, who remarks with complete correctness:—"He who does not study homœopathy, and does not translate the ideas of Hahnemann into the language of modern natural philosophers, and so has not obtained a complete knowledge and capacity to employ them, is not a fully accomplished physician, and will be lacking in his profession the most important resources." Such a man, therefore, we add, will never exercise any power over nature, nor learn to obey her.

Practice of Medicine.

CASES ILLUSTRATING THE SELECTION OF THE CHARACTERISTIC SYMPTOMS.

BY DR. BAYES.

When a group of symptoms present themselves to our notice, it is not always easy to determine, in the hurry of actual practice, which, out of many, shall be selected as the *characteristic symptom* to guide us in the choice of the remedy.

Few men, in a case of pneumonia, would have been led, as Mr. Wilson was, to select the "fan-like motion of the alae nasi" as the characteristic indication; and in this selection he was guided by the experience of many years, rather than by the prominence accorded to the symptom in the proving of the medicine.

Yet here his clinical experience stood him in good stead; and I have myself cured two cases by *Lycopodium* 30, where similar symptoms were very marked. Both were cases of pneumonia, occurring in very unhealthy children, during a convalescence following scarlet fever, which had been treated Allopathically.

It has occurred to me to record a few cases, where clinical experience has proved the importance of certain symptoms, and their right to be considered as characteristic.

CASE I.—*Amenorrhœa cured by Belladonna.*

Sophia W., aet. 17. First seen, Sept. 2d, 1863. For twelve months has been failing in health and strength. Countenance anæmic. The catamenia appeared once, twelve months ago, and have not recurred since. She is greatly troubled with leucorrhœa, like white of eggs. Has pains from the pubes, running through to the back. Has severe headache, coming on once a week, sometimes oftener; the pain affects the eyesight. When the headache is present there is intolerance of light. Pupils of the eyes greatly dilated.

Looking to the generally anæmic condition of this patient, and her amenorrhœa, I ordered Pulsatilla 3d, a pilule three times a day for a week.

Sept. 16th. There was no improvement in any respect; and she also complained of pain after food.

The head and eye symptoms now led me to prescribe Belladonna 12, a pilule twice a day for a week.

23d. She reported herself much better. The period had occurred. Ordered to continue Belladonna. At the next visit she reported herself quite well.

Dr. Tessier very justly observes that it seldom occurs that it is possible to find a single remedy which shall be homœopathic to the whole course of a disease; nay, more—that you can very seldom meet with a single remedy which will completely cover all the symptoms which are simultaneously present. We therefore frequently find that while a large number of the symptoms are removed by one medicine, others remain which require the exhibition of a second remedy.

This difficulty of finding a single remedy which will exactly cover all the symptoms of a disease has led to the alternation of remedies by most of our practitioners.

Others have been led, by this difficulty, to treat disease on a pathological basis; and a third and very much smaller number have followed Dr. Lutze, in the practice of mixing medicines—a practice which he asserts was sanctioned by Hahnemann himself.

The following case illustrates the utility of a secondary medi-

cine. Whether both sets of symptoms would have simultaneously disappeared, had both medicines been given in alternation, or mixed, is a mere matter of conjecture.

CASE II.—*Sore Throat cured by Belladonna, followed by Pulsatilla.*

Sarah P., æt. 34. First seen, Sept. 4th, 1863. Was seized yesterday with shivering and great aching in the limbs, followed by sore throat and fever. Scarlet fever is very prevalent all round her home. Tonsils and uvula red, swollen and inflamed. Ordered Belladonna 12th, eighteen globules, dissolved in half-pint of water; a dessert-spoonful to be taken every three or four hours.

Sept. 9th. The patient was greatly better in every respect. Febrile symptoms had disappeared, but the throat still remained sore. Ordered Belladonna 3, a pilule three times a day (from C. S. *Sore throat*).

18th. The sore throat disappeared shortly after the last visit, but a sense of choking in the throat remained. Ordered Pulsatilla 12 (from C. S. *Choking sensation*), a pilule twice a day. This cured the choking sensation, and left the patient quite well.

The following case illustrates, on the other hand, the folly of changing a medicine, with the idea of hastening a cure, unless there is some strong reason for it.

CASE III.—*Chronic Asthma cured by Lachesis; cure retarded by Pulsatilla.*

James S., æt. 65. First seen, September 4th, 1863. Has been subject to chronic cough for more than two years. The cough comes on at night, in long distressing fits of dry coughing, which are not relieved till he expectorates towards the end of the fit a quantity of white frothy mucus, very tenacious and gluey. Tongue red and clean; heart's action normal; bowels confined; patient thin and pale. Ordered Lachesis 12, a pilule three times a day (from C. S. *Dry fit of cough, relieved toward the end by coughing up frothy tenacious gluey mucus*).

Sept. 9th. Greatly better. Sleeps well; less cough and expectoration. Continue Lachesis 12.

18th. Still better. Bowels regular. The pale countenance of the man and some slight symptoms of venous congestion induced me to order Pulsatilla 3, a pilule three times a day.

23d. Patient not so well; cough increased. Ordered Lachesis 6, a pilule three times a day.

30th. Very much better, in every respect. Continue.

Oct. 14th. Quite convalescent; cough and expectoration almost ceased. Continue Lachesis 6, a pilule twice a day.

21st. Cured. The patient has not been so well for years.

This case presents another point of interest, as it shows conclusively the power of Lachesis when strictly indicated. The value of Lachesis has been denied by some of our transatlantic brethren. This is one of many cases in which I have seen it of great service.

CASE IV.—*Enlarged Cervical Gland, &c., cured by Mercurius Iod.—Dyspepsia cured by Veratrum.*

Harriet P., æt. 36. Sept. 4th, 1863. A patient of dark bilious complexion came to me with an indurated cervical gland, on the right side of the neck. She had also pain in the region of the liver, extending to the right shoulder. Pain after food. Pyrosis several times a day. Ordered Mercur. iod. 12, a pilule twice a day (from C. S. *Enlarged gland and pain in liver*).

11th. Gland much less and soft. Liver symptoms cured. Dyspeptic symptoms no better; pyrosis several times a day, and great epigastric pain immediately after every meal. Ordered Veratrum 6, a pilule twice a day (from C. S. *Gastrodynia and pyrosis*).

18th. No pyrosis. Better in every respect. Ordered Verat. 12, a pilule twice a day.

Oct. 2d. Reports herself quite well.

In this case it may be fairly inferred that the two medicines would have cured the patient much more rapidly if given in alternation.

CASE V. *Intermittent Neuralgia unaffected by China, cured by Belladonna.*

Eliza A., æt. 23. Sept. 4th. A pale, anæmic, but stout young woman. Has severe neuralgia of the left side of the head and face. The pain comes on with great heat and redness in the face. Occurs on alternate days, coming on at 2 P. M. with great regularity, and lasts till she has been in bed for some time; she then gets to sleep, and next day is free from pain, though weak. Ordered her China 12, eighteen globules to be dissolved in half pint of water; give a table-spoonful three times a day (from C. S. *Periodicity*).

9th. No better, and in addition has sore throat. Ordered Belladonna 3, a pilule every four hours (from C. S. *Sore throat, flushed face, and periodicity; attack coming on in the afternoon*).

11th. Very much better. The attack delayed till 7 P. M., and lasting only three hours, in a milder form. Ordered Belladonna 3d decimal, four drops in half pint of water; a table-spoonful every four hours. There was no attack after this, and the patient, whom I saw some weeks after, was perfectly well, and looked healthy and strong.

In none of these cases was there the slightest change of diet ordered, nor is it my usual habit to change the diet of patients unless there is some very strong necessity for doing so.—*British Monthly Hom. Review.*

A TAPE WORM REMOVED BY HOMŒOPATHIC AGENTS.

BY CHARLES W. BABCOCK, M. D.

An article in a previous number of this journal, entitled "Pumpkin Seed for Expulsion of Tape worm," reminds me of a case that I had three years ago. A lady called on me for consultation, who stated that for the past four years she had been seized with a pain in the abdomen as soon as she awoke in the morning, which would subside soon after she arose, yet leave such a sickening sensation that sometimes she could not eat her breakfast. She would also feel the same pain if she awoke at any time during the night. It resembled the colic, but was not always uniform, being only at times severe. This continued without variation for three years, when she began to be attacked with severe griping in the bowels, which would continue three or four hours, abate for a short time, then return with renewed vigor. These paroxysms occurred frequently during the last of the four years previous to my interview with her, and were always preceded by either a diarrhœa, or a feverish indisposition, or a distress at the stomach which took away all appetite for food. She was very costive, and had recourse to cathartics; but the rectum was so swollen and sore, that every evacuation was attended with great pain. In the rectum she often felt an itching and crawling as of worms, and sometimes a motion in the abdomen as from the presence of a living creature. This motion was occasionally violent, and of course distressing to the patient. There was often a pressure in the lower part of the abdomen, as if borne down by a heavy weight. After a while she began to have chills every morning at breakfast, accompanied with a pain in the top of her head, and sometimes a dizziness that amounted to vanishing of the sight. These symptoms invariably commenced as soon as she swallowed the first mouthful, and gradually increased in their duration until they would remain half the day. Her appetite was never craving, yet must be gratified at the moment its demands were felt, or she would be seized with such a weakness and trembling, that she would not be able to do anything, and would be compelled to assume a sitting or recumbent posture until her hunger was appeased. All these symptoms were worse during menstruation.

Some time previous to my interview with the patient, a friend had made a full statement of her case to an Allopathic physician of twenty years' practice, who declared it to be "a female weakness,"

and made her a prescription, among which was Morphine, but she had too much good sense to follow it. A vial of her urine was then sent to a distinguished uroscopist, who specified some remote difficulties, but gave not even a hint of the real cause of those singular symptoms so manifest in her case. As I was the first and only Homœopathic physician that had ever practiced in this region, she ventured to consult me contrary to the advice of her friends. After a careful diagnosis I became satisfied that she was suffering from a tape worm. It was also apparent that she had a uterine difficulty, as hinted by the physician previously consulted; but an examination *per vaginum* proved it to be retroversion, which the patient herself attributed to the weight of the tape worm.

At first I did not mention my suspicions of her having a tape worm, but dismissed her with a prescription, and requested her to call as soon as she had taken the whole.

The prescription was *Mercurius* 6th, and *Sulphur* 3d, dilutions in pellets No. 2, thirty of each to be dissolved in separate tumblers half full of water, and two teaspoonsful taken alternately once an hour during the day. It was not until two weeks afterwards that I saw my patient again, who stated that about twenty-four hours after she commenced taking the medicine she began to feel a distress in the bowels, which continued without abatement until she had taken the whole. At the end of a week, supposing this distress to be the result of costiveness, she used a syringe, when she discovered several long, narrow, thin, white strips among the fæces, which I did not hesitate to inform her were pieces of a tape worm. The exhibition of remedies then was Sulphur as before, but Mercurius was exchanged for *Stannum* 6th dilution, and administered like the first. An inspection of the pieces passed in a subsequent evacuation confirmed my diagnosis, and I continued the exhibition of Stannum and Sulphur, except in substituting the 3d trituration of Stannum for the 6th dilution. These agents were not steadily used, for while taking them she experienced such a gnawing sensation at the stomach and strange feelings in the head, as well as a despondency and irritability equally intolerable, that an occasional suspension was quite necessary. It was only during their use that the pieces of tape worm were discharged, which would appear as soon as she began to take the remedies and continue for a few days after she had ceased, and then would not be seen again until the agents were resumed. Owing to the feeble condition of the patient, and to successive inflammatory attacks of the lungs, peritoneum and all of the

abdominal viscera, which required an intermission of these agents, it was not until the end of six months that the last vestige of the tape worm was seen in her stools.

According to the estimate of others as well as myself, the whole length of the tape worm could not be less than fifty feet. The same lady has consulted me twice since for a return of the gnawing in the stomach, pain near the region of the stomach, and motion in different parts of the abdomen, when an exhibition of *Stannum* and *Sulphur*, 3d potencies, have removed the disquiet, and caused the expulsion of pieces of a tape worm.

CHLOROSIS.

CASES TREATED BY J. BOSLER, M. D., DAYTON, O.

Miss L. R., age eighteen, commenced menstruation at thirteen years, continued healthy until within the last year, at the time I was consulted. The following symptoms presented themselves. Menses very scanty for last year. Highly impressible nervous temperament; of late a deranged state of the digestive organs and ovaries; pale blanched complexion and lips; eyelids puffy; tongue white, covered with viscid mucus; a general languor both mental and physical; throbbing at the pit of stomach; scanty menstrual discharge; rapid breathing on moving about; coldness of hands and feet; loss of appetite; nausea; cutting pain in the sides and abdomen; also pains in the loins; flatulent distension of abdomen; headache with shooting pains, extending to the teeth, swelling of lower extremities to an alarming extent, so that the patient could scarcely get about.

Treatment: Salt baths for one week. Puls 2d, Calc. carb. 6th, every three hours for two weeks; then Ferri citras two weeks; and lastly Chi. 2d, and Calc. c. 6th. Treatment from beginning to this time about eight weeks. Menstrual discharge fully established, face and skin natural, swelling entirely gone, and now enjoys good health.

Case second. Miss —, age seventeen years; painful and difficult menstrual colic; deranged digestion; frequent attacks of semilateral headache; shooting pains extending to the head and teeth, shifting from one side to the other; sallow complexion, difficulty of breathing; sense of suffocation after moving; coldness of

hands and feet; pains in loins; sensation of weight in abdomen; spasms in stomach, nausea, inclination to vomit; want of appetite; dislike to food; swelling of feet and ankles; great fatigue; sadness and tears; tongue covered with mucus; menses scanty.

Treatment: Puls 2d every three hours daytime for one week; Calc. carb. one week, three times per day; then Sulphur every night for one week, lastly Puls. and Calc. morning and night. Dismissed cured in six weeks.

DROPSY TREATED BY GALVANISM.

BY C. T. HARRIS, M. D.

Mrs. V., aged seventy (70) while absent from home in York State, was attacked with ascites, but under Homœopathic treatment so far recovered as to be able to reach her home in Wisconsin. During the summer of 1863, in the ensuing autumn, she was attacked very severely with a return of the complaint, which resisted all medication and progressed until the skin was near to bursting; her limbs were twice the natural size; the chest and abdomen were so large and tense as to make the skin painful. The bowels were free and evacuations copious, urine variable, but average quantity. Large sacs of water pendent from the eyelids, and the patient was unable to help herself up and down. At this juncture, I resorted to acupuncture of the lower limbs and they continued to discharge for several weeks, when the orifice closed over it, was opened and a sheet folded four double was soon saturated. This had the effect to lessen the bloat and limber the body, and for six months she continued to improve, got around the house and gained beyond the most sanguine expectation, this however, she ascribed largely to the action of *Wintergreen* tea, which she persisted in drinking to keep the kidneys active, and in her case it seemed to have the desired effect. Little else was done for her, as her case was regarded as nearly hopeless. After a time that lost its efficacy, and as the dropsy and enlargement were nearly as bad as before. I was again called to her, and again had recourse to the acupuncture of the arms, which leaked off the water as before. I then had recourse to galvanism, and gave the general and tonic current with Hall's portable battery. This treatment was followed up once per week by my wife,

with the internal use of China and Arsenicum. She was discharged, cured last summer, and has remained so since, bloat all gone. When last seen, bowels regular, kidneys do., skin wrinkled, and she presents the appearance of healthy old age.

COAL OIL FOR WORMS.

Everybody knows that coal oil is used externally, for most everything, but its administration for worms may be new to some of the readers of the "Observer."

Mr. W. B., thirty-five years of age, had been constantly troubled very much with "thread worms," (*ascaris vermicularis*), from the time he was a child. Consulted a great many physicians and tried a great many remedies, but was never benefited in the least. Having noticed how quickly coal oil (the oil in ordinary use for lamps) killed "bed-bugs," he came to the philosophical (?) conclusion that it would be just as effectual for worms. He took a wine-glass full before breakfast, for three mornings in succession. Felt very comfortable the first and second mornings, save unpleasant eructations; the third dose, however, was followed by nausea and vomiting. In the afternoon of the third day, it began to purge him pretty freely, and brought away an unnumbered lot of his old offenders. Has been perfectly free from them since—now about two years.

His son, of six or seven, began to show the same symptoms—half the quantity of oil was given to him, in the same way, with the same success.

G. O. HUSBAND.

Galt, C. W., Jan. 11, 1865.

ON THE TREATMENT OF SYPHILIS.*

BY DR. CLOTAR MUELLER.

In primary chancre, whether simple or indurated, the *Merc. precip. rubr.* acts on an average still best and most certainly, only it at times leaves us in the lurch with the phagedænic sores. *Cinnabar* and *nitric acid* are then not unfrequently of more service.

From the Report of the Leipzig Polyclinic for 1863, *Hom. Vierteljahrschrift*. vol. xv p. 463.

But the fact is not to be overlooked that the external treatment is of importance, and consists in diligent covering of the sore with charpie dipped in cold water and well squeezed out, so that the pus may be hindered as much as possible from irritating the sore and environs. Bodily rest, warmth, and strict low diet, are also of great influence. On the other hand, in constitutional syphilis the low diet seems to be of no consequence; on the contrary, the patients who are in a low state of health, must be strengthened by an abundant and tonic diet. If the bones become affected the Hydriodate of Potash is obviously the remedy, and one which almost never disappoints our expectations, and in this respect affords one point in the treatment of syphilis where we can to some extent speak of certainty. Only, however, we must not give it in weak doses, but undiluted, and to the extent of 3 to 5 grains daily. It is true the Hydriodate cures very often the bone affections alone and not the whole lues. *Aurum* is also a medicine at times useful in bone affections, especially those of the nose and palate, as also it appears more indicated for *caries* and *necrosis*, while the Hydriodate of Potash suits better for nodes and bone pains. Against ulceration of the throat and mouth, and the so-called mucous patches, the Corrosive Sublimate is still the best medicine, much oftener than nitric acid, which only does good at times where Mercury has been already abused. From Thuja, Sanguinaria, and Kali bichromicum, I have never, or only very seldom, seen any decided action. *Merc. hydrocyanicus* and Schweikert's combination of *Merc. biniodat. Kali hydriod.* have been urgently recommended for lues; up to the present time I have had no particular success with either. Besides, it has been on the whole sufficiently proved that seldom, or never, can a lues be thoroughly cured with one single remedy, or at least one single preparation, unless, indeed, it be by a carefully regulated inunction cure, as I have seen a few times in the hands of other medical men. This much at least is certain, that of all the so-called quicksilver cures, this is the one that acts most surely and offers the fewest dangers and after evils.

The cure of condylomata frequently gives us great trouble. Thuja and Cinnabar are, often enough, of no use whatever. On the whole, this disease is still mysterious and unexplained in its nature, because it is often quite certainly a symptom of true lues, while at other times it seems to arise alone as an independent and more or less local disorder, without displaying any distinct signs of which class it belongs to. If the warts follow and arise in the course of a simple gonorrhœa, they are generally removed permanently by the application of Tincture of Sabina, or Muriate of Iron. But if they come as a symptom of general lues, little or nothing can be effected by the local treatment alone, for they generally come back again shortly. In one case they vanished in a wonderful manner after *Lycopodium* in two or three doses. In another case I saw warts of the prepuce from gonorrhœa return pretty suddenly after they had been cured by *Lycopodium* inwardly and *Sabina*

outwardly, sixteen years before, though no fresh infection had taken place, and no sign of dormant lues had shown itself all that time.—*British Journal of Homœopathy*.

Physiology.

THE NERVOUS SYSTEM.

TO R. LUDLAM, M. D.—*My dear Sir*: I am glad to learn through the medium of the *Homœopathic Observer*, that you do not favor physicians who ignore the science of Pathology in the treatment of disease.

Thought ripens slowly; like the agricultural products of a country, it has to be raised from the seed. The first sower of our seed is still fresh in our memory—his seed ripens slowly, and we are yet the infant products of its growth.

His life was too short, for the magnitude of his discoveries—his platform too narrow for the broad field of our own.

The nervous system holds our dynamic force, and I have long been aware that we know less of its construction than is yet concealed from us, and I am encouraged to submit my convictions to you, as an independent thinker who would readily deviate from the school in which he was taught, if he saw a light beaming in the darkness of error.

As it is now understood, the nervous system seems to me to represent a skein of yarn full of knots with their angles demonstrated backwards. Every scientific work which treats of human life demonstrates the nervous system centripetally, from the circumference to its centre, and every work thus written, it seems to me must be read backward to be understood by the reader. The nervous, medullary and cerebral systems are three differing systems of relation, and physiologists identify them all into one relation, and testify the brain to be their common centre. This order of succession in the development of organic life, ignores the statement by reversing the problem. It is well known that the nervous system is fully developed and performing its functions before the spinal marrow appears on its theatre of action,* and that the spinal column is organized

* See acephalous infants.

and performing its functions before the floor of the skull is laid for the construction of the brain. Thus it is seen that the working force is centrifugal, radiating from the nervous system through the spinal marrow to the medulla oblongata, from which the force is reflected centripetally back to the solar centre where these alternate forces maintain the nucleated sphere of organic life, till the negative pole of the medulla oblongata (the electro-magnet of human life) sends forward its negative force to the construction of the brain.* The mystery of the nervous system rises into form at this point by confounding and condensing three organic forces into one. We should adopt the same rule, in physiology that we pursue in every other question appertaining to complex relations, viz: that organs which differ both in structure and function, should not be identified or confounded in their relations. The nervous system, like all other systems, is a unit in its centers of circumference with three mutual relations and dependencies, and I now propose to awaken the Lethean sleep of the medical school now slumbering in the meshes of the nervous system, by stating it to be a single nerve of dual relations with its two main trunks, which radiate these branches into the network of the nervous system.

The starting point of the nervous system is found in the cœliac axis in the centre of the solar plexus, with its two semi-lunar ganglia, one on each side of it, both being the largest ganglia in the body and giving birth to the greater and lesser splanchnic nerves. If the greater splanchnic be demonstrated centrifugally, through the medium of the great sympathetic, and the lesser through the medium of the pneumogastric, they will represent a physico-mental nerve, one branch of which makes the mind and the other the matter. These branches rising from one base are joined to each other on the inside by branches from the solar plexus itself, the lesser the mental, joining the cœliac axis at its root.

Thus armed, this nerve with its excentric axis, the axis around which all bodies move, is the matrix of the nervous system, with its action and reflex action, and when carried out from its nucleated point to its widest spread relations, it constitutes the action and reflex action first pointed out by Hall.

Rhinebeck, N. Y.

Yours

F. VANDERBURGH, M. D.

* Negative force 72-100. Positive 84-100.

Miscellany.

HOW TO TEACH ANATOMY. No. 2.

MUSCULAR ANATOMY.

If there are any elementary principles about anatomy, those principles should be carefully distinguished one from the other, and taught separately. Osseous, muscular, vascular, and visceral anatomy, each represent a topic to be distinguished as wholly distinct from each other, and to be presented in that light to the student's mind, so far as the nature of the case will admit. Instructors of mathematics do not put their scholars to the task of solving problems at the outset of their study, but first teach them notation, addition, subtraction, &c., leaving for subsequent work, the solution, the more abstruse combination of these principles. Now I think I have shown how osseous anatomy may be entirely separated from every thing that surrounds it, and should be so presented to the learner's mind. And as in mathematics, multiplication involves addition, and division involves subtraction, so muscular anatomy which follows next in order, involves osseous anatomy, which, however, in no way complicates the subject if the latter has been thoroughly taught beforehand. Now in attempting to teach muscular anatomy, I respectfully submit, that it is absurd and false in the extreme, to describe muscles as having *origins* and *insertions*. It is well known that bones have points of origin or ossification; but no histological anatomist has ever discovered a particular point at which a muscle begins its development, and if so, it is not alleged that that point corresponds with the so called *origin* of the muscle. The term as used here, is explained as meaning the most fixed point of the muscle, but no such definition is allowable according to Webster. That there is a lack of an explicit term to represent this idea is very true, but that is] no {reason why a word should be chosen whose meaning is so utterly at variance with the fact sought to be represented. Again, the term *insertion* is explained as meaning that point of the muscle most movable, and is not designed to convey the idea that the portion of the muscle referred to is, any more in point

of fact inserted into the bone, than the part named the origin. And all this in the face of the fact, that no authorized definition of these terms gives any authority for such an application of their meaning. It seems to me unfortunate indeed, that all our anatomical teachers and text books have fallen into this erroneous method of instruction.

But how shall we remedy this defect? To attempt the invention of new terms to convey these ideas would be a hazardous and uncertain remedy. The fault is not really here but rather in the system of explanation adopted. We do not find muscles uniformly presenting to us a marked distinction in their borders or extremities as to mobility, or immobility. And those muscles that do so, very readily and almost constantly change those relations by co-ordinating with other muscles in changing the method of their contraction. No explanation is needed of this statement. The fact is universal.

I therefore respectfully submit, that this whole difficulty may be easily obviated, by adopting a new method of explanation. In describing a muscle, we should make no reference to its method of action, since that is variable, but simply refer to its points of attachments. Every muscle may be so described, and the student will just as readily apprehend their use as by the other method. In this view, every muscle has a superior, inferior, lateral, anterior, posterior, external, or internal points of attachment. And these are the only facts necessary to set before the learner's mind. And no one can deny, that this method is based upon facts just as they exist; and requires in its use no perversion of terms, or adherence to arbitrary classification. Will not our school of medicine produce a man whose daring and ability will give us a text book on anatomy, more original and truthful than those now accepted as our guides?

Example: the biceps is a long fusiform muscle, situated along the anterior aspect of the arm in its entire length. It has three attachments, a superior, middle, and inferior attachment. Superiorly it is attached to the upper margin of the glenoid cavity, its middle attachment is to the apex of the coracoid process, and inferiorly it is attached to the tuberosity of the radius. This description omits a full explanation, which of course should be given to the class. It also avoids the terms *long* and *short heads*, since, while the muscle has a well

defined belly, it has nothing at all resembling a head or feet; and it is manifestly a stretch of the imagination and an abuse of the term, to so apply the words. T. P. WILSON.

Cleveland Homœopathic College.

GELSEMINUM VERSUS GELSEMINUM.

Dear Doctor: The "truth," is I presume, what we are all seeking after, in respect to Homœopathic investigation. In the absence of a true pathogenetical data, we may certainly rely upon clinical observation, at least to the extent of a trial, their endorsement to be the result of our own experience, upon such trial. The observations of different physicians, in mere clinical investigations, so often seem to clash, in regard to the remedial properties of a given remedy, that the student is mystified and confounded, and even older Doctors led astray upon a remedy of which they may have had but little experience. I was particularly led to this chain of reflections, by reading in your February number, 1865, the article on "Gelseminum in threatened abortion," by Dr. Pease. If you keep a file of the Medical Investigator, turn to the January number, 1864, and read the article reported on "Gelseminum in rigid os uteri," by Dr. Williams. The same case appears in Hale's New Provings, page 208. Both these cases were of threatened abortion; both in the sixth month of pregnancy—both received the same remedy, in about the same dose, 2 gtt. once in an hour. In both cases, other remedies had failed. Wonderful to relate, in Dr. Williams' case, under the action of Gelsem. the rigid os uteri gave way; the foetus was readily expelled, and the woman happily delivered. A second trial of the Gelsem. in retained placenta, same case, after the vain exhibition of other remedies, eventuated in again relaxing the rigid os uteri, and the secundines came safely away. Not so however, in the case of Dr. Pease. On the contrary, notwithstanding that the woman's only living child was born at seven months, and this one might naturally enough have been expected near the same time, though she was in severe labor pains, instead of "relaxing the muscles of the os uteri and vagina, upon which their contractile power depends," (vide Hale) Gelsem. does for her, right the opposite of what it did

for her suffering sister. Her threatened abortion was averted, and on the third day she ran up stairs to congratulate the Doctor, and we are left to infer, run on to *term*. Now Doctor, how are we to reconcile this discrepancy in the action of *Gelseminum* in these two cases? If you had been called in the case of Dr. Williams, and witnessed the prompt action of this drug in relaxing the parts and expelling the product of conception, would you have deemed it safe to have given it, and if at all, in the same dose, in the case of Dr. P.? It may be that I am dull of comprehension, but I must confess, that in this "blow hot," and "blow cold" with the same drug, especially in the same strength, I "don't see it!" This is, not only with me I find, but with dozens of other reflecting minds, a problem, not yet satisfactorily solved. Hale's hypothesis of dose, is to me, as yet, the only solution to this apparent opposite action of the same drug. If now, I could trace in these two cases, the primary or secondary symptoms belonging to *Gelseminum*, and that drug had been given in accordance with Hale's theory. I might perhaps reconcile the opposite results. Will you or Hale enlighten a fellow traveller?

Batavia, Ill., March 4, 1865.

C. ALEX. G.

RISE AND PROGRESS OF HOMŒOPATHIC PRACTICE.

PRESENTED BY J. BOSLER, M. D., DAYTON, O.

EDITOR HOMŒOPATHIC OBSERVER—DEAR SIR:—If not intruding upon your space in the Observer, I will contribute a short history of the rise and progress of Homœopathy in this city. In the year 1847, Prof. Doctor Adams of the West (well known to western physicians), located in Dayton, O. The doctor remained about one year, then Dr. Wigand took his place. When Dr. Adams commenced the practice in this city there were about twenty persons, all told, who made pretensions in support of this practice, but the doctor being affable and successful, added new converts, and the doctor left this city with a good name for Homœopathy. Next in order Dr. Wigand followed and added much credit to the practice. During Drs. Adams' and Wigand's stay I became acquainted with them, and from their marked success, I began to investigate this new practice. After having blistered, bled and drugged my patients for twenty-seven

years, I determined to find some more humane mode; from this time forward I became a close observer, and tested many of the remedies, in some of the most aggravated forms of acute diseases, which soon proved to my satisfaction the law of *similia similibus curantur*. In the spring of forty-nine I became a partner in practice with Dr. Wigand. This summer was the year in which Asiatic cholera visited this city to an alarming extent. This opened a field of practice, which, if successful, would prove to the world that Homœopathy was the law of truth. Fortunately the first victims of this disease fell into our hands, the success in their treatment and recovery gave us more than our proportion. The number of patients treated were about *seven hundred*. The fatality in that number were about four per cent.; from these facts many citizens took warning, and from that day to the present Homœopathy has had a place in this community. This city has, at this time, four Homœopathic physicians; what the extent of all their practice is, I am not able to say. Yet I do know that my friend, Dr. Webster, and others, have good business, and at this time there are at least two thousand families in this city and vicinity that sustain this practice in toto. I would state here that when I first ventured upon this new field of practice, many of my old school friends became alarmed at my change and expostulated with me not to enter into an uncertainty; my proposition to them was, at least, to give it a trial; this is all that any physician need want, when undergoing a change from Allopathy to Homœopathy; and my word for it, he will better himself and patients.

A DISAGREEABLE SURPRISE.—At a recent complimentary public dinner, given by his professional brethren to Dr. Thomas, the eminent surgeon to the Staffordshire County Hospital at Wolverhampton, the recipient of this honor is reported to have stated in his acknowledgment of the toast of the evening, that “he had instituted a long and careful inquiry into the nature and value of Homœopathy, and had found its principles and practice to be so unequivocally true and reliable, and, above all, so extremely effective in the treatment of disease, that he had firmly resolved to devote the remainder of his life to their propagation and support.” Surely, the feelings of his Allopathic friends, at this unlooked-for announcement, may be more readily imagined than described, more particularly when it is remembered that the newly-declared homœopath is a gentleman of no mean literary and scientific attainments, and, moreover, the well-beloved guest of the assembled party, and the subject of their warmest encomiums. Dr. Thomas is a graduate, with honors, at the University of London, a member of the

college and hall, and a gold medalist, both in anatomy and medicine, of London University, Longridge prizeman of University College also, and, prior to his appointment of surgeon to the Staffordshire County Hospital at Wolverhampton, was demonstrator of anatomy in the University Medical School.—Extracted from the *Liverpool Weekly Mercury*, December 31, 1864.

Our Colleges.

HOMŒOPATHIC COLLEGE OF PENNSYLVANIA.

The Class of 1860, Graduates of the Homœopathic Medical College of Pennsylvania, had a class meeting and dinner, March 3d, at the "Continental" hotel, Philadelphia, the occasion being the first anniversary of their graduation. The meeting was called to order by the Class Secretary, J. Lester Keep, M. D., of Brooklyn, N. Y., whereupon John Malin, M. D., of Germantown, Pa., was elected President. A permanent organization was decided upon, and his term of office voted to continue for five years. After a sumptuous repast, a report was listened to from each member of the class of his personal and professional history during the five years past, and many interesting items of medical experience were narrated. Those necessarily absent reported through the Secretary. Four had passed "that bourne from whence no traveler returns," and interesting memorials of their sad history were also presented. Their names are: Dr. Ira R. Adams, of Lowville, N. Y.; Dr. Moses Bulkley, of Cambridge, N. Y.; Dr. Levi Judson Pierce, of Keene, N. H.; and Dr. Joseph W. Smith, Jr., of Kinderhook, N. Y. Resolutions of condolence and sympathy were passed, which the Secretary was requested to forward to the friends of each. Two of the number died from an epidemic with which they were heroically battling, until worn down by the fatigue and exposure of their profession, they themselves fell victims to the fatal scourge. The two others died of consumption,—suddenly at last, but which fatal termination had been anticipated for some time by their friends.

The Faculty of the college in 1860 having been invited to be present, Prof. Temple, of Philadelphia, in their behalf, spoke with his usual eloquence of the gratification it afforded him to be present, and the interest with which he had listened to the varied medical experience of the class. The Alma Mater was always proud to recognize and do honor to sons who had proved faithful to their trust, and the record of the "Class of '60" was an honor to any institution. These re-unions are always profitable, as well as a source of pleasant memories, reviving and renewing former intimacies and friendships. He desired the custom should become universal, and complimented the class upon having taken the

initiatory. His touching allusion to "the vacant chairs," brought many a sad recollection of companionship with the departed classmates in those happy days of college life, when all were filled with hope and bright anticipations, which many, alas! were not to realize.

Resolutions thanking the Secretary for his successful efforts in effecting this re-union were passed, and he was re-elected to the same office. Members of the class, changing their residence, were requested to notify him of the change. The different reports and memorials of the deceased were ordered to be entered upon the minutes, and a report of the meeting sent to each Homœopathic Journal for publication.

After other minor business the meeting adjourned, to meet in Philadelphia in March, 1870.

J. LESTER KEEP, M. D., *Class Secretary.*

WESTERN HOMŒOPATHIC COLLEGE.

The class which has just finished its studies numbered sixty-eight matriculants and thirty graduates.

GRADUATES.

J. C. Harrington,	L. F. Crawford,
Edmund Beckwith,	S. H. Sparhawk,
W. D. Williams,	A. S. Knapp,
Peter McDonald,	Frank Noyes,
H. H. Jackson,	A. O. Hunter,
D. A. Davis,	S. G. Warren,
Wm. White,	L. M. Carpenter,
G. M. Burns,	N. B. Wilson,
H. Willis,	N. T. Hubbell,
Wm. M. Eddy,	J. N. Pond,
L. M. Charlton,	Samuel Schell,
W. D. Linn,	H. W. Nelson,
Joseph Hooper,	J. Dixon,
C. T. Campbell,	H. M. Warren,
H. B. Bagley,	M. B. McCausland.

Prof. J. C. Sanders, addressed the class, treating not only of the duties and responsibilities, but of the rights also, of the medical profession. He graphically sketched the usual, conventional routine of the physician's practice, which he condemned by giving in contrast, his ideal of the duty and practice of that office. He said the popular creed in reference to the use

of the Doctor, like that promulgated under the former decision of the Supreme Court, concerning the negro, was, that the physician had no rights which the white man is bound to respect. He protested against the universal selling out of the service of the profession to the public, and the consequent engrossment of all the practitioner's time, to his loss of opportunities for general cultivation, and the defrauding his family of his presence and social influence. A liberal culture was insisted on, and the students were earnestly exhorted not to allow considerations of profit or honor to cheat them into the neglect of duties growing out of their social and moral relations.

Hahnemann Medical College—1865.

GRADUATES.

Wm. Brandemuehl,
Frederic Brandemuehl,
Rufus Backus,
A. H. Fanistock,
A. W. Woodward,
A. G. Leland,

Wm. Pattison,
W. C. Morrison, M. D.,
L. B. Hiatt,
W. F. Schatz,
Chas. Woodhouse,
H. Cate Chase.

H. C. Lehnert,

HONORARY DEGREES.

L. E. Ober, M. D.,

A. T. Bull, M. D.

NOTICE. — The usual Summer Course will commence in Hahnemann Medical College, the second week in April, and will continue until the first of July.

Personal.

PROF. H. C. ALLEN—After having filled the Chair of Anatomy in the Cleveland Homœopathic College, during its late session, has returned to his home in Brautford, C. W., to resume the practice of his profession. It was my privilege to attend this, his first course of lectures, and it gives me great pleasure to be able to say that he discharged the duties pertaining to that chair with credit to himself and entire satisfaction to the Class. His kind and gentlemanly bearing, his zeal in the work in which he was engaged, soon won him the respect and confidence of every student, and he continued thus deservedly popular while he

remained His sole aim seemed to be the advancement of the Class, and to this end he directed all his energies. Besides delivering his daily lecture, he would attend on dissections, go from class to class, demonstrating and quizzing, and calling the attention of the students to many items of interest, which otherwise might have passed unnoticed. Through his instrumentality, also, a society was organized, and held weekly meetings for review of the different branches. At these meetings Prof. A. was almost always present, and took an active part. The benefits to accrue from these weekly reviews are incalculable.

That he may have a long life, and meet with the success in his profession, which he so richly merits, is the sincere wish of

Yours,

G. M. B.

Book Notices.

NEW REMEDIES, THEIR PATHOGENETIC EFFECTS AND THERAPEUTICAL APPLICATION IN HOMŒOPATHIC PRACTICE. By Edwin M. Hale, M.D. E. A. Lodge, Detroit, Michigan; Turner, 77, Fleet Street, London. 1864.

Though not in the direct ratio, yet in a certain proportion, our powers of combating disease depend on the number of specifics at our command, therefore Dr. Hale has rendered excellent service by the publication of the above work, and deserves the best thanks of our body and of medical men in general. We have here no less than forty-four medicines rendered acceptable to the practitioner by being either made known to him for the first time, or collected together from the various periodicals where the provings were first published. If not already in the hands of all our readers, we recommend them to procure the book without delay. There are some medicines, already partially known to us, given in a more complete form, both as to provings and clinical use by Homœopaths and Allopaths, of various kinds, though still all more or less incomplete, yet our knowledge of them is brought up to the day, and in such a way as to make us grasp with considerable accuracy their sphere of action. These are: *Æsculus Hippocastanum*, *Apocynum Androsema* and *Cannabinum*, *Arum*, *Baptisia*, *Caulophyllum*, *Cimicifuga* or *Actæa Racemosa*, *Collinsonia*, *Eupatorium*, *Gelseminum*, *Hamamelis*, *Hydrastis*, *Phytolacca*, *Podophyllum*, *Sanguinaria* and *Veratrum Viride*. In addition to these we have others almost quite unknown to us, and though not so completely proved as the above even, yet still enough to make a beginning and intro-

duce us to their use. Some of them seem very promising, and will fill up some much felt gaps in our *Materia Medica*, if they turn out as well as they promise. These are: *Asclepias*, *Chimaphila*, *Cornus*, *Dioscorea*, *Erigeron*, *Helonias*, *Iris*, *Leptandria*, *Senecio*, *Trillium*, &c.

Dr. Hale, in his preface, with great modesty gives his reasons for the publication of the above new remedies, viz. that although the curative scope of the remedies already known to us is very wide, it did not apparently include many symptoms and diseases. This we think entirely sufficient. Besides that he gives the suggestion of Teste, that plants are adapted to cure the disease which infest the same localities. This hypothesis is by no means new on the part of Dr. Teste, nor do we think it true on the part of anybody, and is nothing but a vain fancy, and would mislead us grievously if trusted in practice; *e. g.* are we not to use *Cinchona* in temperate latitudes? Besides these as a reason (for the choice of the particular medicine) there are the cures performed in eclectic and domestic practice; a very good reason, and the one which determined Hahnemann in the choice of many of his best medicines. But in fact, we require no reasons for additions to our *Materia Medica*; for by the very nature of a specific practice we cannot have too many well-proved medicines, as we require the closest possible adaptation of the remedies to the finest shades of disease, and as there are almost infinitely varied, and even actually changing frequently, we shall require constant additions to our *Materia Medica*. The only question is whether imperfectly proved medicines should be admitted, and to this we must answer in the affirmative, for the well-proved medicines are still too limited to meet all cases; as we may indeed see, *a priori*, by our inability to cover the symptoms in a great number of cases, and we find out *a posteriori*, by failing to cure with them, (for no amount of proving will develop intrinsic powers the medicine does not possess); while we have a considerable number of empirically known medicines which help us out by the mere general indications. The use of such should, however, always be under protest as it were, and in the expectation that their powers will at some time be properly fixed and defined by a complete proving. Most of the remedies introduced to us by Dr. Hale are in this position, and no one is more sensible than himself of this, as he gives us an introduction on the desiderata of Homœopathic provings in which the standard is set very high, and we think shows a thorough appreciation of the value, as well as the difficulties of the subject. We trust that many will follow Dr. Hale's excellent example, and that he will go on in subsequent editions raising the provings gradually to his own standard of excellence. In this volume he says most of the provings are incomplete, and he will be satisfied if they are only pronounced as suggestive. We do not grudge to our American brethren the honour of having furnished so many valuable additions to our store of medicines, but we wish that our English Homœopaths would show even some small signs of emulation in this field. However, the apathy in this

matter is very disheartening, and shows to our mind that Homœopathy is scarcely making any real progress here during the last few years. It is true we have had a good deal to talk about the subject of late, but that only seems to make the lack of work more conspicuous.—*British Journal of Homœopathy*.

It will be necessary for physicians who have not obtained this work, and who desire to procure it, to order it immediately as the edition is nearly exhausted. No new edition, in its present form, will be published. The new work will not be ready for nearly a year.

MOSMAN'S MATERIA MEDICA CHART. Detroit Homœopathic Pharmacy. \$1.00.

The author says: "The principal design of the Chart is to show at a glance the range of action, or organs of the body, chiefly affected by one hundred of our most valuable medicines, together with the relative degree of the intensity of their action. It may be regarded as a compilation from all the authorities, correct in every essential particular."

THE HOMŒOPATHICIANS MEDICAL DIARY. Adapted for any year, by E. P. MORMAN, M. D., N. Y. C. T. Hurlburt, Detroit Homœopathic Pharmacy—2d series—\$2.75 and \$3.00.

The most conveniently arranged pocket Manual for the Homœopathic physician now in use.

Books and Pamphlets Received.

(Reserved for future notice.)

WHAT IS HOMŒOPATHY? A new exposition of a great truth, by W. H. HOLCOMBE, M. D.

OLIVER WENDELL HOLMES REVIEWED, by ALBERT J. BELLOWS, M. D.

ANNUAL REPORT OF THE IOWA HOMŒOPATHIC ASSOCIATION.

THE METHODICAL PHYSICIAN. Closing lecture of the course on Obstetrics, in Hahnemann College, session of '64 and '65, by R. LUDLAM, M. D.

WHO IS A HOMŒOPATHICIAN? A Lecture delivered before the Hahnemann Institute, Philadelphia, Feb. 17, 1865, by ADOLPH LIPPE, M. D.

EIGHTH ANNUAL REPORT OF THE STATE REFORM SCHOOL OF THE STATE OF MICHIGAN, 1864.

Lectures.

MEDICAL REFORM AND MEDICAL MONOPOLY IN THE ARMY.

Delivered by T. P. Wilson, M. D., Professor of Anatomy and Physiology, Cleveland Homœopathic College, Class of 1863-4.

Civilization touches with her magic wand every department of human society. Every nation blessed with her presence feels her genial and vivifying influence in its sciences, in its arts, and in its religion. War, though largely composed of a barbaric element, is a great promoter of true civilization. Water tossed by tempests may be turbid for awhile, but it cannot stagnate. Trees shaken by the winds may look ruffled for a time, but they take deeper root, and shoot out stronger branches, and bear better fruit. So, out of the contesting elements of this great national conflict, will inevitably spring some of the grandest developments of human progress. Only yesterday we had no navy, and to-day our monitors are models for the world; and they stand ready, either singly or combined, to sink the vast and costly fleet of armed vessels of the whole world. We never had a standing army, (except once on the Potomac,) yet to-day the measured tread of our veteran legions wakes a thrill of terror in the hearts of transatlantic thrones.

No man can doubt, that out of this magnificent yet melancholy war, the American people will rise ere long, more intelligent and invincible than they have been in the past. Indeed, we may truthfully say, that our success in fighting the battles of our country, will be the measure of our future glory; and our power to overcome our enemies will depend solely upon the extent to which we bring the elements of our civilization to bear in aid of the contest. A new order of things demands new and better agencies; and we must tax to the utmost our intelligence, and our abilities, to create new means. To go to war with the plans and instruments of revolutionary times, is so absurd that no man for a moment harbors the thought of it. And yet that we are guilty of just this crime, (for such I may call it,) it is the purpose of this article to show.

Our war for the Union demands principally of our civilization the highest possible development of two of its great elements, namely: *Mechanical ingenuity* and *Medical skill*. The army we have put into the field asks of the Government, as before all other needs, that it thoroughly arms the well, and successfully treats the sick. Every soldier knows that in every war the world ever saw, ten fall by the effects of disease where one is slain on the battle field. And he more fears the hospital than the attack of the enemy. And when the patriotic soldier brings the offering of himself to the altar of his country, he only asks that his guns may be rifled, and his boats iron clad; and he will stand up unflinchingly to the assault, until victory or death is won. And he couples to that modest request the earnest prayer, that the sanitary regulations of the camp, and the medical treatment of the hospitals, shall, correspondingly with the instruments of war that he uses, be the result of the most enlightened efforts and teachings of our boasted civilization.

Now let me ask every candid mind to contemplate the record of the transactions of the medical department of our army for the past three years. When the war first broke out, the adherents of the allopathic school of medicine were in possession of every official position on the medical staff. And it is well known to the public how they at once barred the door, and suffered under no pretext whatever, the admission of adherents of other medical schools. No matter how well qualified a candidate might be, if he did not hold a diploma from an Allopathic College, and continue to swear by the God of Cathartics, and the God of Diuretics, and the God of Antiphlogistics, if he would not bow down and worship Opium, and Calomel, and the Lancet, he was, without judge or jury, set aside. Thus arrogating to themselves all medical wisdom, and assuming with unblushing effrontery all medical responsibilities, they have enjoyed full control of the medical and sanitary departments of the great Union army. And the record that has been made by their army surgeons, during the past three years, is a lasting inheritance that no school of medicine could for a moment stand under, except one, whose mortality list runs back for more than a thousand years. Ask of the feeble convalescent soldiers that are to be found along all our streets, how well the medical department has answered their need. You will find multitudes of them, thoroughly disgusted with the treatment they have been subjected to. And they have escaped the hated hospital, and sought their homes, in order that they might get within reach of something more human and scientific than the nauseating compounds they have been forced from day to day to swallow. Not only so, but a number of able bodied men stand ready to-day to enlist in their country's service, if they could only feel themselves safe in hours of sickness—if they did not dread more the attack of the surgeon than the attack of disease.

It is indeed a melancholy fact, that while the best mechanical skill that our civilization possesses, has been made tributary to the production of the best instruments of war, the best medical skill and science of the country have been privileged to contribute but a moiety of

good, for the benefit of our suffering soldiery. We speak now, not of any surgical practice, but of medical treatment proper. And we do fearlessly affirm, that much of our army hospital practice shows no advance beyond fifty years ago. Men who strut about camp with the cabalistic M. S. upon their shoulder straps, are using the same agencies, upon the same general plan, that were used in the days of the Revolution. True, our civilization has developed vastly better medical agencies, but they are not allowed to be brought in and applied. At one time, the General-in-Chief of our army asked for their introduction. Almost all the officers of a whole brigade in the West have petitioned for them, but they have been flatly refused; and we stand to-day with no advance, except in isolated cases.

Just why one school of medicine should assume to monopolize this department, none but the partizans of that school can see. Are the soldiers, when at home, all the patrons of Allopathy? Do Allopaths pay all the taxes of the country? Are there any peculiar guarantees to the Allopathic school in the constitution or laws of the country? Such questions as these are being pressed home upon the Government; and we rejoice to know that the sufferings in our army are creating in the public mind a strong reactionary tide, toward a more refined and successful method of medical practice for the army, as well as for the people.

It might be well under a monarchy to say, that the government is carrying on a war; but in a republic like ours, it is the people who are the authors and agents of war. The Government is but the machinery the people use. The executive, legislative, and judicial branches of the Government are but the agents, controled, not by their own impulses, but by the constituency they represent. It is the people who set on foot and maintain all governmental transactions, whether they be peaceful or warlike. It is the great mass of individuals composing the citizens of the nation who, in this war, lay down the only true plans of conducting the campaigns. And it is they who furnish not only the plans, but the means, in rich and countless abundance. Having done this much, they hesitate not for a moment to assume the garb and office of a soldier, and go forth armed upon the battle field, to see that the plans are properly executed, and the means not prodigally wasted. War is emphatically the people's work; and that it may be swiftly and successfully terminated, every department of science and art is thrown open to competition. Quickened by a laudable ambition to excel their fellows, and benefit their country, every man deems it the highest joy to contribute the best of his possessions to the great cause of war. And the Government, as the voice of the people, says to the citizens, "The prize lists are open, gentlemen. If you want promotion, get it by heroic action on the field of battle. If you want lasting renown, seek it in victory or death at the cannon's mouth. And if you cannot fight, perhaps you can invent. And if you will make the best iron clad boats, we will use them. If you will make the best muskets, rifles and pistols, you shall have our orders for the same. If you can invent a better article of light artillery, or siege gun, or a more destructive ball, or shell, you

shall have our unlimited patronage." Now it is under just such a stimulus as this that the American people have achieved the work of a century in a year. Breaking down the conservative barriers of the past, they have stepped boldly forward upon a new field, and by new and untried agencies, have placed themselves far in advance of the nations of the old world.

Now if this freedom of competition had prevailed as a rule in every department of the army, then certainly no men, or class of men, could possibly in justice complain if they found themselves wanting in success and patronage. But it is our painful duty to declare, that while the largest liberty and the most valuable privileges have been extended to competitors in rank and file, and in shop, and field, yet in the medical department the most bigoted and arrogant system of monopoly has prevailed, to the lasting injury of our army, and disgrace of our country.

If it be true that this war is of, and by, and for the people, then no class of persons can, on any just grounds, be excluded from bringing their sacrifice to the common altar of the country, and making there an offering of the means, and the fruits of their abilities for the good of all. The medical arm of the service is unquestionably a most important agent in carrying on the war. And to the end that it may be fully developed and applied, the medical profession of the country is called upon to come forward and render efficient service. A knowledge of surgical art, and an ability to treat disease, is all the army and the people require; and men of that stamp are to be found in every section of the country, men who, by years of devotion to their profession, have achieved great professional excellence, and in many cases enviable renown. And they are by no means the graduates of any one medical college, or any one class of colleges. The Homœopathic, Eclectic, and Allopathic colleges, chartered alike under the laws of the various States, have each sent out their representative men, and they are found every where wielding the scalpel, and applying their remedies, with more or less success. In every community where they have been placed side by side, they have commanded an equal patronage. Or, in other words, the Allopathic physicians have found themselves under the necessity of yielding a large portion of their practice into the hands of the ardent and successful adherents of the Homœopathic and Eclectic schools. Now these are the men whose services are of incalculable value to our army. The various communities in which they practice, have sent large delegations to the camp, and they say to the patriotic physician, "Come, give us your aid, for our needs in the hospital are as great as in camp or field."

Look, now, at the shameless arrogance of one of these medical schools. The representatives of that school seize at once upon every official position, and then issue an edict making an outlaw of every medical man in the country, except the men of their peculiar faith; and so far no man, not supposed to be an allopathist, has been allowed to hold a commission on the medical staff. The wants of the army have been great. Many a poor soldier, wounded in action, has laid three days with his wounds undressed, maggots have taken possession

of the wounds long before the surgeon. Thousands in the hospitals have suffered more than death, over and again, for want of competent medical and surgical treatment, not because the men were not to be found who were willing and able to meet this want, but because a medical dog-in-the-manger policy ruled the day. Men who were not Allopaths, no matter how well qualified, were refused the privilege of working, even gratuitously, for the suffering soldiers. And then these men, guilty of this great crime, not daring to meet the responsibility of such acts, have basely charged it upon the Government. They have sought to escape the just indignation of an intelligent public by the plea of legal right, when no such legal right existed. Thus has an ignoble partizan spirit stood up, and for mere selfish ends monopolized the duties and received the rewards of the medical department of the army. And this they have done, though they stood between the soldier and his needed good, between the country and its welfare.

How long such an unwarranted medical monopoly shall curse the army, we surely do not know, but we hopefully pray that our Government, in answer to the many petitions and prayers of the people, will soon give the representatives of the several medical schools of the land equal rights and privileges in the army. For surely the Government should not be behind the people in accepting the benefit of a true medical reform.

MORPHINE IN HEROIC DOSES.

BY DR. GROMEL.

During the afternoon of the 15th of January, 1864, a Mrs. Catherine Gardiner, a widow, aged 38, living in Bridge Street, called on me, and, after stating the following history, asked my assistance. She said that in October 1864, she had an attack of *Gastritis*, induced by she knew not what. Vomiting and pain were excessive, and seemed to baffle all the efforts of the physician in attendance to even palliate her sufferings, until he, as usual in such an emergency, had recourse to Morphine. This agent quieting her, the physician continued its prescription for several days, until she, ascertaining that it was the sole remedy given her, discharged him and procured the salt herself. Four or five days elapsed, when she, though much enfeebled, was enabled to leave her bed; but she soon found that if she discontinued the Morphine the pain in the stomach soon returned with vomiting. Thus it ran on until weeks lengthened into months, and months into years! The pain in the stomach was hushed, but anomalous aches in body and limbs was nature's growing protest and warning. Larger daily quantities became necessary, until nine or ten grains per day became the usual dose for over eight years.

Believing that she was gifted in a pre-eminent degree with the spirit of exaggeration, I called on her druggist, Mr. Ernest Burgess, doing business on Fourth street, in Logansport, Indiana, and who attested the truth of the history. Her menses had disappeared now about seven years. She essayed many times to crush the habit, but the consequences of breaking away from it appeared so hazardous, that she dared not persist, especially as her "regular" physicians warned her of unknown dangers resulting. Her fear of consequences, it would appear, was drowned in apprehensions of a rise in the cost of the drug, for at the first intimation of such an event she called on me. On review, the diagnosis seemed clear,—the prognosis not quite so transparent. Her thin, dark, nervous face, turned towards me, assured me much trial and perplexity in the management of the case. Not despairing, and with her promise of implicit obedience, I assumed the case. Believing that a remedy which would have been homœopathic to the original disease, and which was now lying smothered and only half controlled, ready to flash out when that control ceased, was the remedy indicated. I exhibited *Arsenicum alb. 2nd*, a powder every two hours, and bade her take two-thirds of the usual dose, or seven grains of Morphine per day. On the 17th she returned, looking badly, complaining of pain in the stomach, "and all over." Repeated the same prescription, and bade her take one-half the daily quantity of Morphine. Saw her again on the 20th, when she came in only to tell me that she had returned to the old habit, not being able to endure the pain, which was not confined to the stomach alone, but which darted through every joint and along the limbs. Thirst was also excessive. Still desiring a "cure," I determined to precipitate matters and risk the consequences. Requesting her to give up the Morphine at once, *Arsenicum 2d* and *Bry. 2d* was given to her to be taken in alternation every hour. The *Bryonia* was for the symptoms she spoke of as occurring last. The object in taking away the Morphine at once was to get her confined to her bed, where she might be held manageable, and the resulting changes treated. About 10 o'clock next day she sent a messenger with word that she was dying. Found her in high fever, pulse strong and full, violent vomiting of greenish matter, face dark red, knees drawn up, cramps in calves of leg and in both arms, stomach and whole abdomen tender even on pressure of bed clothes. The tongue was coated white in centre, with sharply defined margins at the red edges. She prayed and begged for some Morphine, "just a little on the tongue," which was refused. Same prescription in water, two teaspoonfuls every twenty minutes, in alternation. Called in the evening and found the patient worse, delirium supervening, but continued same remedies. On the 22d, patient no better, tongue dry and brownish, vomiting ceased, conjunctival congested, still delirious, bowels tympanitic. No changes of remedies. Added hot fomentations. Two dejections from bowels for first time since taken to her bed.

Wakened after mid-night by the disagreeable message that she was very much worse. Hurried around to see, and found her, as I thought, rapidly sinking. Visions of the inutility of trying experi-

ments arose before me, and I saw the propriety of "letting well enough alone." My patient had just recovered from a chill, and the cold perspiration stood upon her brow in large beads! Consciousness had returned, the limbs were relaxed, and pain much lessened. The pulse, as may be supposed, was rapid and weak, and would at times intermit. The pallid, pinched face, and general expression of the case was not a happy one. Watched her for a few minutes and could scarcely put aside the temptation to return to the Morphine, a vial of which I had already drawn from my pocket. Determined that the treatment should not halt at this stage, I gave her four drops of the 1st of Camphor—for the above symptoms—in a teaspoonful of water, in alternation with three drops of the German tincture of Aconite. 3rd dilution,—I scarcely knew why—in a teaspoonful of water, remedies alternated every 15 minutes. In an hour and a half signs of a decided reaction commencing, I quitted her for the night, ordering three-quarters to an hours interval between the administration of the remedies, as the patient improved.

23rd. This morning my patient is doing beautifully. No vomiting, no cramps, not much tenderness of abdomen, but little fever, pains much easier, pulse full, has a short, hacking, irritative cough—just such as *Sticta* would remove—and is lying on her left side and the saliva is running from her mouth in a perfect stream. The basin into which it flowed—an ordinary tin wash basin—was a little more than filled during the next twenty-four hours. Gave her my congratulations and *Mercurius vivus* 2nd, a powder every hour. Offered her some Morphine next day, but she was extremely disgusted at its mere mention. On the 26th she sat up a portion of the day, but was quite feeble for some days longer. Within six weeks after her menses returned, and within six months married and moved away, forgetting to pay my bill.

ON THE ACTION OF GELSEMINUM.

BY E. M. HALE M. D.

Dr. Garnsey, in the April No. of OBSERVER, calls attention to an apparent discrepancy in the action of Gelseminum, in two cases which he cites. The case of Dr. Williams was one of *inevitable* abortion; that of Dr. Pease, *threatened* abortion. In the former there was undoubtedly effusion of blood under the membranes, and a consequent separation at such a portion as would cause irremediable irritation and final expulsion, had no remedy been given. The latter was as evidently a case of functional irritation in which no bleeding had occurred, and consequently no extravasation or separation. It was in fact a false labor,—the pains were false pains.

In the *former* case the muscular tissue of the uterus was in a condition of abnormal contractility, with an irritation of the nerves of motion. In the *latter*, there was probably no abnormal constriction, only a condition of irritation of the motor nerves. Now for the action of gelseminum. In material doses, *i. e.*, from the mother tincture to

the third dilution, its *primary* effect is to *relax the normal contractility of muscular fibre, or paralyze the motor nerves*. Its *secondary* effect is to cause *abnormal contractility of muscular tissue, and abnormal irritation of motor nerves*.

In both the cases cited, the Gelseminum was *secondarily* homœopathic. It relaxed the preternaturally rigid os, in the one case, and calmed the false pains in the other, on the same principle, with the effect in both cases of restoring a normal condition, as a final result. In Dr. Pease's case there was no rigidity to overcome, only an irritation of the uterine motor nerve, after which all abnormal action ceased. In Dr. Williams' case, the spasmodically closed os would not let the natural pains have their due effect. The Gelseminum removed the constriction, and the normal pains were permitted to do their duty.

Gelseminum is only **PRIMARYLY** homœopathic when there is unnatural relaxation of the muscular tissue of the uterus, and an absence of *normal* irritability in its motor nerves. It is well known that Gelseminum will, in cases of atony of the muscular tissue and motor nerves of the uterus.

In all the cases above referred to, the original cause of the abnormal condition may have been in the spinal cord, on which Gelseminum has such pernicious influence in poisonous doses.

There is another fact which should not be lost sight of, in estimating the apparent contradiction in the effects of Gelseminum. It is well known to all practical physicians who have made much use of Gelseminum, that the same quantity will not have the same effect upon different constitutions. All medicines vary somewhat in their action, but none so much as this. One person, in health or disease, may take 10 drops of the mother tincture and perceive no effects from it; another will be made blind and paralytic from the same amount of drops of the first attenuation. There are many things about the action of Gelseminum which need clearing up; this, time and the investigation of studious physicians can only effect.

GELSEMINUM IN VERTIGO.

BY C. H. LEE, M. D. :

Nov. 3rd, 1864. S. S.—Age three, every two or three days would have vertigo with blindness, causing him to fall down. At times the blindness comes on gradually, and he stumbles over every little thing in his way. Is troubled with worms. Gave Gelseminum 4 att., night and morning for a week, which cured him.

Nov. 28, 1864. Mrs. P.—At times when she would be walking through the house, or out doors, there would be a dull feeling in the head, after which there would be total blindness for ten or fifteen minutes. After the blindness was over, she would feel perfectly well. Is very seldom sick. Looks well and hearty. Gave Gelseminum 4 att. Has had no return of the complaint since.

A Case of Uræmic Convulsions, the Sequela of Scarlet Fever.

J. F. MERRITT, M. D. STAATSBURGH, N. Y.

O. H., a lad 12 years, of good constitution, was attacked on Friday, March 8d, with *Scarlatina anginosa*. The eruption was well developed, and under the use of the appropriate remedies he gradually convalesced, On the 23d, just twenty days after the appearance of the disease. he was attacked, after exposure to cold, with tremors of the whole body, especially of the left side, which however subsided before treatment was commenced. Face anasaruous, urine albuminous. Treatment: *Merc. corr.* 3d. This was 10 A. M. At 12 M. was again summoned, found him retching constantly, occasionally bringing up a dark viscid fluid, portions were almost black; alvine evacuations similar. Tongue red, trembling had ceased, *great prostration*. Prescription, *Verat. viride* 2d. At 5 1-2 P. M., was sent for again, found him in convulsions, partial opisthotonos, spasmodic contractions confined almost exclusively to the *left side*, pupil fully dilated, and retina insensible to light; total loss of vision, extending back an hour and a half anterior to the appearance of the convulsions. The convulsions occurred every 10 minutes, the intervals growing shorter until they were of only 4 minutes duration, breathing rattling. Prescription, *Nux v.* 3d, every half hour. In three hours the convulsions ceased and did not return.

March 24. Better in all respects except loss of vision, which remains. Looking upon this as an effect of the uræmic poisoning (for it occurred an hour and a half prior to the first convulsion) I turned my attention to the condition of the kidney which had given rise to this condition of things, manifesting itself by the secreted albuminous substance found in the urine. Found the urine scanty, and passed guttatem accompanied by pressure at the neck of the bladder. Prescription, *Merc. corr.* 3d, and *Cantharids* 2d, in alternation every two hours.

March 26. Urine less turbid, anasarca almost disappeared, and vision entirely restored. Treatment that of yesterday continued, and under these medicines he recovered.

Let me add a word as to the use of *Merc. corrosiv.* in albuminuria, following scarlatina. I have more faith in it than any other drug, paying of course due regard to its pathogenesis, and selecting accordingly; but the conviction is every day becoming stronger that in the majority of cases it is the sheet anchor. To this remedy not the rational so much as the physical signs, in other words the pathology, unerringly points. In the case narrated, under its use, the loss of vision, the effect of the uræmic poisoning, was speedily restored. Will some one of your many contributors give their experience, if they have had any, in the use of this drug in albuminuria, whether following scarlet fever or as constituting an independent disease?

LACHESIS.

Mrs. T., æt. 45, of a somewhat full habit, extremely nervous, light hair, light blue eyes, light complexion, yet earlier in life must have had a good deal of color; lively disposition, but having a good deal of firmness; a widow, no children, just merging from the climacteric or critical period, menstruated but twice during the last 12 months, life sedentary, habit costive. Has had for years hyperæsthesia vagina, also hyperæsthesia of the throat, and violent attacks of headache at irregular intervals, for which she has taken, as she said, "almost everything." Has doctored with Allopathic and Homœopathic physicians, Botanical and Eclectic doctors, with Electricians as well as Hydro-pathic, or water cure doctors.

Having tried the above ordeal in Cleveland and Detroit, and married, she finally settled down as a confirmed opium eater, as her only solace. I was called to see her at 2 o'clock A. M., on the night of May 10, 1865.

Found her suffering with violent darting, stabbing pains in the forehead, from the upper part of the forehead down to the centre of the head, she described it "as if knives were being thrust into the brow most constantly," aggravated by the least motion; also a feeling of violent pressure from above downwards. Had been suffering about two hours when I was called. Thought the attack had been brought on at this time by wearing a flat instead of a hood, and thereby taking cold in her head, followed by this attack. Gave her 5 pellets of Lachesis the 12th, and left another similar dose to be given in half an hour if an improvement, but not otherwise.

May 11th, 11 o'clock A. M. Found her sitting up in room reading, and quite free from pain. Did not have to take second dose. Felt very perceptibly easier in ten minutes after taking the drug. Never had anything, not even Opium, or Morphine, or applications of hot water, (from which, by the way, she sometimes found relief,) relieved her nearly as much or as readily. At other times confined to the bed for several days.

I report the above as a slight testimony in favor of that much abused, yet highly valuable remedy Lachesis, and that others may be induced to give it a fair trial before condemning it.

A. J. SAWYER, M. D.

Phytolacca Decandra in Inflammation of the Mammas.

BY JOHN DRUMMOND, L.R.C.P.E., ETC.

Mrs. C., æt. 35, consulted me on the 20th February, 1865. She had suffered for three months from a series of abscesses in the right breast, and there were six fistulous openings in it, from which milk and pus escaped when any pressure was made upon the gland. The skin was of a dark brown color, indeed nearly black in places, and she had severe pain, which prevented her obtaining rest. She looked pale and haggard, her appetite was very bad, indeed she loathed most

solid food; her pulse was quick, and she suffered from reeking perspirations after the slightest exertion, and every night in bed. She was poulticing the breast with linseed meal, and taking the Citrate of Iron and Quinine. I ordered the medicine and poultices to be discontinued. The breast to be covered by two folds of lint, moistened in a lotion made from sixty drops of the mother tincture of *Phytolacca* in four ounces of water, and evaporation prevented by means of oil silk over this. This application to be renewed four times in twenty-four hours. Two grain doses of *Silica* B every three hours. Beef tea, brandy and wine, to be taken in small but repeated quantities, varied with any other nourishment she could fancy. She had attempted to nurse on the sound breast, but as she was so weak, and as she had little milk for the nourishment of her child, she was easily prevailed upon to wean it. Under this treatment she rapidly recovered. The pain in the breast began to subside in twenty-four hours, and in three weeks the fistulæ had healed, and the breast was beginning to assume its natural color. The woman's health rapidly improved, the night sweats subsided, her appetite returned, and from the very rapid improvement in this case, I believe this new remedy will prove invaluable in these painful and often tedious cases.—
(*British*) *Homœopathic Observer*.

Materia Medica.

HAVE WE AN INDIGENOUS ACONITE AND PULSATILLA.

BY E. M. HALE, M. D.

My colleagues know that I am particularly interested in the development of our indigenous Materia Medica, and my investigations have tended that way for many years. Of late I have often asked myself the above question. It can be answered in the affirmative so far as this: that we have in the United States several varieties of Aconite and Pulsatilla, which are indigenous to this country. But the more important question, namely: whether these plants possess the same or similar medicinal virtues as the European varieties used by Hahnemann, remains unanswered. I can find no record of any investigations into their medicinal action, either in health or disease. But I propose, with the assistance of my professional friends, who are interested in this subject, to test the matter as thoroughly as possible.

It will be necessary, however, in the very beginning of our investigations, to procure specimens of the plants, and in sufficient quantity to make enough tincture to use in the proposed experiments and provings.

I propose, therefore, to those physicians who reside in or near the neighborhood where the plants are found, to collect as soon as possible a quantity of each plant procurable, and send it to Mr. Halsey. It

should be carefully dried in the shade, and packed so as to be beyond the reach of injury by external influences, such as dampness, etc.

To each one who will send such specimens I will reciprocate the favor, if desired, by sending a copy of the *second* edition of "Abortion," which will be issued in the course of the year.

I append a botanical description of each plant, and the portion of the country where they may be found, in order that there may be no trouble in recognizing them.

It is probable that they may be found in other places than those mentioned. I see no reason why the Aconite may not be found in the high regions of Wisconsin and Minnesota; as well as in Pennsylvania and New York; and the Pulsatilla all over the Western States.

I am aware that plants to be used for medicinal purposes are best when gathered in the months of August, September and October, but I am anxious to procure them as soon as possible.

ACONITE.

A. Uncinatum, L. (Wild Monkshood) Glabrous: stem slender, erect, but weak and disposed to climb; leaves deeply 3-5 lobed, petioled; the lobes ovate-lanceolate, coarsely toothed; flowers blue, helmet erect, obtusely conical, compressed, slightly pointed or beaked in front. Rich, shady soil, along streams; S. W. New York and southward along the mountains- June, Aug.

A. Reclinatum, Gray. (Trailing Wolfsbane) Glabrous: stems (3 deg. by 8 deg. long) leaves deeply 3-7 cleft, petioled; the lower orbicular in outline; the divisions wedge-form, incised, often 2-3 lobed; flowers white, in loose panicles, helmet soon horizontal, elongated conical, with a straight beak in front. Cheat Mountain, Virginia, and southward in the Alleghanies. Aug.: lower leaves 5 min.-6 min. wide; flowers 9 sec. long, nearly glabrous.

Prof. Tully mentions another variety, the *Aconitum Columbianum*, but I cannot procure any work containing a description of the plant.

PULSATILLA.

P. Nuttalliana: Villous with long silky hairs; flower erect, developed before the leaves, which are ternately divided, the lateral divisions 2-parted, the middle one stalked and 3-parted, the segments once or twice cleft into narrowly linear and acute lobes; lobes of the involucre like those of the leaves, at the base all united into a shallow cup; sepals 5-7, purplish, spreading. (*P. patens*, Ed. 1). *Anemone patens*, Hook, &c., not of L. A. Nuttalliana, D. C. (*A. Ludoviciana*, Nutt). Prairies, Wisconsin, (Lapham), and westward. April: a span high; sepals 1 min.-1 1-2 min. long; tails of the fruit 2 min. long. More like *P. Vulgaris* than *P. Pratensis* of Europe.

The Pulsatilla must not be confounded with the varieties of *Anemone* indigenous to the United States.—*Medical Investigator*.

SUBSTITUTE FOR THE IRRITATING PLASTER.—Spread a piece of cotton drilling, of the requisite size, with lard; and sprinkle upon it podophyllin if a speedy action is desired, or finely powdered podophyllum if you wish it to act slowly.

The Effects of the Calabar Bean as an Antidote to Poisoning by Atropia.

In the ophthalmic department of the hospital at Prague last August, four boys, engaged in cleaning the room, drank a portion of a solution of Atropia, thinking that it contained spirits. Two of the boys either spat out or vomited the fluid, and exhibited no symptoms of poisoning, but the two others who did not vomit were distinctly poisoned—one, however, much more so than the other. The symptoms were those of poisoning by Belladonna, and consisted of delirium, dilatation of the pupils, feeble pulse, and in one there was coma, alternating with furious delirium. Both the patients were taken to bed, one of them being restrained in a straight-jacket, and cold lotions were placed on their heads. Dr. Kleinwachter happened accidentally to have with him a solution of the Calabar-bean extract in glycerine, and, by way of experiment, he gave to the patient who was most affected, ten drops of the solution (six grains of extract to one drachm of glycerine), which in about a quarter of an hour produced violent vomiting. The pulse became stronger and quicker, rose to 75 and then to 80 in the minute, the temperature of the body fell, the delirium abated, the patient became more quiet, consciousness returned, urine was passed with some pain in the urethra, and the pupils became somewhat contracted. In the case of the other patient, who was less affected, some of the extract was dropped into the eye, but without any good effect, for on the next day the symptoms were almost unchanged, while the patient who had taken the solution of the Calabar-bean internally, had almost completely recovered. The rapid and striking improvement in one of these cases appears manifestly to be attributed to the administration of the Calabar-bean extract, for the patient who was not treated in the same manner, showed no improvement for forty-eight hours.—*Berliner Klinische Wochenschrift* and *British and Foreign Medico-Chirurgical Review*.

LOCAL ANÆSTHESIS.—It is sometimes very desirable to produce entire or partial local anæsthesia, as in opening an abscess or felon. This may be accomplished in two ways: by the action of cold or local use of chloroform. To produce the necessary degree of cold I employ pounded ice and salt, contained in a bladder, to the part, circumscribing its action by keeping the adjacent parts covered with flannel. A much easier plan, however, is to lay a small piece of soft cotton cloth on the part, and drop the chloroform on it as fast as it is evaporated, until the desired effect is produced.—*Eclectic Med. Journal*.

SUBSTITUTE FOR TENTS IN DRESSING ABSCESSSES.—M. Menant advised the use of a small crayon of nitrate of silver introduced into the opening for a moment. It is an excellent method; obviating the use of tents which occasion much suffering, and is especially applicable in mammary abscess. The slight eschar produced by the nitrate of silver, prevents the union of the walls of the opening. —*Id.*

Proving.

CACTUS GRANDIFLORUS.

ITS PATHOGENESIS. FROM OBSERVATIONS ON THE HEALTHY ORGANISM,
AND CONFIRMED ON THE SICK.

BY DR. ROCCO RUBINI.

Medical Director of the Homœopathic Hospital of S. Maria Della Cesarea; Corresponding Member of the Homœopathic Academy of Palermo and of the Hahnemanian Society of Paris.

The following article is extracted from the excellent translation by Prof. A. Lippe :

The characteristics of this Cactus consist in the development of its action "*specifically on the heart and its blood-vessels, dissipating their congestions and suppressing their irritations,*" without weakening the nervous system, like Aconite. Hence it is preferable to the latter in all cases of inflammation, particularly in cases of lymphatic and nervous temperaments.

This small pathogenesis, which I place before the public, is but an embryo of the effect produced by this vegetable on the healthy subject. My wife and I, on perceiving how powerfully it acted on the heart and circulating system, causing the shedding of tears and feelings of terror, had not the courage to go further in experiments which might endanger our lives. I hope that others, with more fortitude and less timidity, will be able to complete and correct whatever symptom I may not have accurately described. Every one knows the necessity of provings often repeated, both on the healthy and on the sick, in order to obtain a perfect and convincing certainty of the definite mode of action of each medicine individually.

CLINICAL OBSERVATIONS.

It is a "*specific remedy for diseases of the heart,*" upon which it acts promptly. Hence it may be considered, in such circumstances, as a sovereign remedy, with which no other can compete. In the above organic diseases, the dose is from one to ten drops of mother tincture, mixed in water, and taken at intervals during the day. It will rapidly relieve the painful suffering, even if they are not cured, and do not cease altogether. In the severe acute affections of the same organ the same dose will promptly cure, without the aid of any remedy. In nervous diseases of the heart the globules of the 6th 30th and 100th dilutions give immediate relief. It may, also, be used with confidence in the following diseased conditions :

Sanguineous congestions in persons of plethoric habit—Injurious consequences of catching cold from suppressed perspiration, or from a draft of air---Various kinds of inflammation---Rheumatic inflammations, with swelling of the parts and pain—Catarrhal fevers—Simple

rheumatic fevers—Inflammatory fevers—Gastric fevers—*Cerebral congestions*—Head-ache from sanguineous congestions or rheumatism—Heavy pulsating pain in the head—Tensive pain on the vertex. *Sanguineous apoplexy*—*Profuse epistaxis*—Dry or fluent coryza—Acute rheumatic ophthalmia—Rheumatic otitis—*Rheumatism of the heart*—Rheumatism of the chest—Stenocardia—*Hypertrophy of the heart*—*Aneurism of the heart and the large arteries*—*Acute and chronic carditis*—Organic and nervous *palpitation of the heart*—Hepatization of the lungs—*Sanguineous congestion of the chest*—Bronchitis—Pleuritis—Peripneumonia—*Hemoptysis*—Pneumorrhagia—Congestive asthma—Chronic oppression of the breathing—Catarrhal cough—Pulmonary tuberculosis in the first stage—Nausea—Loss of appetite—*Hæmatement hemorrhoids*—Painful menstruations—*Hematuria*—Strangury—Paralysis of the bladder—Dry, scaly herpes on the ankles and elbows.

HEAD.

Vertigo from sanguineous congestions to the head, (after ten days.) Paleness of the face, and emaciation, (the first six days.) Face bloated (accessio) and red, with pulsating pain in the head, (on the twelfth day.) Great heat in the head, and heat of the face, as if he had been before a strong fire, which causes madness and horrible anxiety, (the first day.) Feeling of emptiness in the head, (the second day.) Violent pain in the head, insufferable, from congestion to the head, (the fourth day.) Pressing pain in head, as if a great weight lay on the vertex. Pain in the head, with great prostration and weariness. Excessive pain in the head, which causes such anxiety that he cannot stay in bed, (on the first day.) Pulsating pain, with sensation of weight in the right side of the head, continuing day and night, so severe as to make him cry out with a loud voice, (after four days.) Very severe pain in the right side of the head, which increases to a great degree when raising the head from the pillow, for many days in succession, (after three days.) Very severe pain in the right side of the head, which is increased by the sound of talking and by a strong light, (the first five days.) Tensive pain on the vertex, which returns periodically every two days, (in the first twenty days.) Heavy pain, like a weight on the vertex, which diminishes by pressure. Sensation of weight on the vertex, with dull pain, increased by the sound of talking, and by the sound of any noise. Pressing pain in the forehead, day and night, for two consecutive days. Pressing pain in the forehead, increased by bright light, and on hearing loud voices or noises. Pulsating pain in the temples, becoming intolerable at night, (the second day.) Sensation of heavy weight in the right temple and on the right eyebrow, diminished by pressure. Continued and tormenting pulsation in the temples and ears, which is exceedingly annoying, and causes hypochondriasis, (the first eight days.) Such strong pulsations in the temples, as if the skull would burst, (the first day.) Pain and drawing in the occiput, increased by the motion of the head. Painful drawing in the aponeurotic covering of the occiput, ameliorated by bending the head backward. Momen-

tary loss of sight, (on the first day.) Loss of sight; there appear circles of red light before the eyes, which dim the sight; (the sixth day.) Dimness of sight; at a few paces distance he does not recognize his friends. At a short distance he does not recognize any one, not even a friend. Weakness of sight for many days in succession; objects appear as if clouded; (the first four days.) Weakness of sight recurring periodically; objects appear to be obscured. Rheumatic ophthalmia, produced by cold air; soon cured. Dry and veey unpleasant coryza; he must breathe during the night, with his mouth open. Fluent and very acrid coryza, which makes the nostrils sore. *Profuse epistaxis*, which ceases in a short time. Pulsations in the ears, continuing day and night, (on the first six days.) Noise in the ear, like the running of a river, continuing all night, (the first day.) Diminished hearing, by the buzzing in the ears; it is necessary to speak in a loud voice to be understood; (on the first day.) Very painful otitis, from checked perspiration, which is cured in four days. Sleeplessness at night, without apparent cause, (first night.) Sleeplessness in the evening and at night, from arterial pulsations in the scrobiculus and in the right ear, (second night.) Protracted sleeplessness during forty-eight hours, with pulsations in both ears, (third day.) He cannot sleep in the first hours of the evening, and when then he falls asleep he awakens suddenly, (the first eight days.) Interrupted sleep at night; the next morning he feels fatigued, as if he had not slept at all; (twentieth day.) Talking nonsense while asleep at night; when awaking, he talks unconnectedly; (tenth day.) Slight delirium at night; on waking up, it ceases for a time, but begins again as soon as he goes to sleep; (seventh day.) Hypochondriasis and invincible sadness, (the first six days.) Unusual melancholy, for which he, himself, can give no reasons, (the first four days.) Profound hypochondria; he is unwilling to speak a word; (fourth day.) Continued taciturnity; he will not answer repeated interrogations; (third day.) Sadness, taciturnity, and irresistable inclination to weep, (the first six days.) Fear of death, extreme and continuous; he believes his disease to be incurable; (the seventh day.) Love of solitude; he always avoids those around him who wish to comfort him; (ninth day.) Extraordinary irritability; the smallest contrariety puts him in a passion; (fifteenth day.)

CHEST.

Feeling of constriction in the chest, which prevents free speech; and when forced to speak, the voice is low (weak) and hoarse; (tenth day.) Constriction in the upper part of the chest, which hinders respiration, (the first fifteen days.) Sensation of great constriction in the middle of the sternum, as if the parts were compressed by iron pincers, which compression produces oppression of the respiration, aggravated by motion, (the first ten days.)* Sensation of constriction of the chest, as if bound, (fourth day.) Painful sensation of constriction in the lower part of the chest, as if a cord was tightly

* It is a remarkable coincidence that the printers of Doctors Dudgeon's and Meyer's translations both have (the first fifteen days.)

bound around the false ribs, with obstruction of the breathing, (sixth day.) Sensation in the chest, as if some one were pressing and holding it tightly; under the delusion that this was the case, the patient cried out, "Leave me alone!" (Third day.) Sensation of great constriction in the shoulders, so that he could not move, (fifth day.) Sharp, wandering pains in the thoracic cavity, very annoying, especially in the scapular region, (the first fifteen days.) Painful drawings in the muscles of the left side of the chest, which extends to the shoulder joint, and impede respiration and the free use of the arm. Pain in the left breast, which is increased by touching, and relieved by gently raising it, (the first twelve days.) Sensation of very annoying movement from before backwards in the cardiac region, as if a reptile were moving about in the interior; worse by day than by night; (the first ten days.) *Sensation of constriction in the heart*, as if an iron hand prevented its normal movement, (the first ten days.) *Dull, heavy pains in the region of the heart*, increased by (external) pressure, (second day.) *Pricking pain in the heart*, impeding respiration and the motion of the body, (fourth day.) *Very acute pain, and such painful stitches in the heart as to cause him to weep and to cry out loudly, with obstruction of the respiration*, (the first eight days.) Oppression in the left subclavian region, as if a great weight prevented the free dilatation of the thorax, (fourth day.) Prolonged oppression of the respiration, with great anxiety, (the first eight days.) Oppression of the chest, with loss of breath, (the first four days.) Oppression of breathing, as from a great weight on the chest, (third day.) Chronic oppression of the breathing, which increases in the open air, and soon goes off again. *Difficulty of breathing, continued oppression and uneasiness*, as if the chest was constricted with an iron band, and could not dilate itself for normal respiration, (the first eight days.) *Periodical attacks of suffocation, with fainting, cold perspiration on the face, and loss of pulse*, (the first eight days.) Anxiety returning in the evening, (the first fifteen days.) Congestive asthma, which soon passes away. *Palpitation of the heart, continuous day and night, worse than walking, and at night, when lying on the left side*, (the first six days.) Nervous palpitation of the heart, augmented gradually on the occurrence of the catamenia. Nervous palpitation of the heart, produced by deep moral affections, is immediately calmed. Nervous palpitation of the heart, existing for several years, in consequence of an unfortunate love affair, is rapidly relieved. Chronic palpitation of the heart, in a boy of twelve, which for many years had resisted all the appliances of art, was almost completely cured. *Acute carditis*, with slight cyanosis of the face, oppression of the breathing, dry cough, pricking pain at the heart, impossibility of lying on the left side; pulse quick, throbbing, tense and hard. These symptoms cured in four days. *Chronic carditis*, with œdematous and cyanotic face; suffocating respiration; continued dull pain at the heart, hydro-pericardium, hydrothorax, ascites; œdema of the hands, the legs and feet; impossibility of lying in bed, of speaking, or even of drinking; hands and feet cold; pulse intermitting: Cured in fifteen days. *Rheumatic carditis, with*

much dry and convulsive cough. cured in four days. Hypertrophy of the heart, that had lasted three years; the patient is pulseless, extremely prostrated, panting and sad; he cannot lie down; he cannot speak; has scarcely slept for fifteen days; weak, forgetful; feet œdematous. He soon is relieved; lies down and sleeps quietly for twelve hours. *Sanguineous congestion in the chest*, which prevents him lying down in the bed, (third day.) *Bronchitis speedily cured.* *Chronic bronchitis, with rattling of mucus*, which becoming acute in consequence of a cold, causes great anxiety and suffocation. It is rapidly relieved, and the acute state ceases very soon. Chronic bronchitis; of many years' standing, with rattling of mucus, continuous day and night; oppression of breathing, on going up stairs, and impossibility of lying horizontally in bed; which is rapidly cured. *Many pleurisies*, which are all cured in from two to four days. Hepatization of the lungs, which is resolved in a few days. *Very severe peripneumonia*, with great oppression of the respiration; pricking pain; acute, intense cough; sanguinolent sputa; hard pulse, vibrating 120. Cured in four days. *Hæmoptysis, which soon ceases.* *Violent pneumorrhagia, which is checked in a few hours, and ceases entirely.* *Pneumorrhagia, renewed every four, six, seven or eight hours, accompanied each time with convulsive cough, and expectoration of two to three pounds of blood, is at once relieved, and ceases entirely in four days.* Obstinate, stertorous cough, worse at night. Catarrhal cough, with much viscid expectoration. Spasmodic cough, with copious mucous expectoration. Cough, with thick expectoration, like boiled starch, and very yellow. Dry cough, from tickling in the throat, (the first fifteen days.) Dry cough, from itching in the larynx, (first night.)

ABDOMEN.

Constriction of the œsophagus, which prevents swallowing; he must drink a great quantity of water, to force it down into the stomach; (sixth day.) Constriction of the throat, which excites the frequent swallowing of saliva, (eighth day.) Fetid breath in the morning, (third day.) Nausea in the morning, and all day long, (seventh day.) Acrid acid in the stomach, which rises in the throat and mouth, and which makes every thing he attempts to eat taste acid, (fourth day.) Sensation of violent burning in the stomach, (the first five days.) Great thirst, which causes him to drink much water, (first day.) Sensation of great constriction in the scrobiculus, which extends to the hypochondria, constricts them, and impedes respiration, (fourth day.) Strong pulsation in the scrobiculus, (the first eight days.) Continuous and annoying pulsation in the stomach. *Very troublesome pulsation of the celiac artery*, after dinner, which lasts three hours, and which corresponds with the pulsation of the right temporal artery. Sensation of heaviness in the stomach. Sensation of great weight in the stomach, which continues many days, (during the first eight days.) *Sensation of weight in the stomach*, which soon goes off, but reappears every time the medicine is taken, (the first fifteen days.) Oppression and weight in the stomach, (fourth day.) Want of appetite and loss of the taste of food, which disappears after

a few hours, (second day.) Complete loss of appetite; he cannot take the least morsel of food; (third day.) Want of appetite and nausea for many days; it is only by an effort that he can swallow a few mouthfuls; (the first fourteen days.) Great appetite, but weak and slow digestion, (twentieth day.) Very slow digestion; even after eight or ten hours, the taste of the food rises up in the throat. Bad digestion; all food causes weight in the stomach, and so much suffering that he prefers to remain fasting. *Copious vomiting of blood.* *Severe gastro-enteritis*: cured in five days. *Severe hepatitis*: cured in two days. Chronic hepatitis and hepatic engorgement: speedily cured. Borborygmus in the bowels, before the alvine evacuation. Distressing sensation in the bowels, very annoying, as if a serpent was turning around, here and there in the bowels, (fourth day.) Very violent pains in the bowels, almost causing him to faint, which continues, more or less, during the day, (seventh day.) Wandering pains in the umbilical region, which cease and recur periodically, (fifth day.) Insupportable heap in the abdomen, as though something burned him internally, (after two days.) The abdominal parietes, when touched with the hand, have a burning sensation, and are much hotter than the other parts of the body, (third day.) Constipation during all the first six days. Constipation, as if from hemorrhoidal congestion. Evacuation of hard, black fæces, immediately on taking the remedy, in a man who had been constipated for some days; the following day, bilious evacuations, (first day.) Bilious diarrhœa, with four or five evacuations in one day, always preceded by pain, (during the first eight days.) Bilious diarrhœa, with pain in the abdomen, eight evacuations in one day, (third day.) Morning, diarrhœa, of very loose fæces, preceded by great pain, eight motions from 6 to 12, A. M.; no motion in the afternoon, (seventh day.) Watery diarrhœa, very abundant each time; ten passages during the morning hours, always preceded by pains and borborygmus, (ninth day.) Mucus diarrhœa, preceded by drawing pains; three motions in the day; (twelfth day.) Sensation of great weight in the anus, and a strong desire to evacuate a great quantity; however, nothing passes; (fifteenth day.) Swollen varices outside the anus, which cause much pain. Great itching in the anus, which causes him to rub the part very often. Pricking in the anus, as from sharp pins, which ceases on slight friction. *Copious hemorrhage from the anus*, which soon ceases. Constriction of the neck of the bladder, which at first prevents the passage of the urine; but when he strains much, he urinates as usual; (tenth day.) Great desire to pass water; and though he tries a long time, he is unable to pass any at all; (first day.) Desire to urinate; after he has endeavored to do so for a long time, he at last succeeds in passing water abundantly; (first day.) Insupportable irritation in the urethra, as if he should pass water constantly. Frequent desire to urinate, with an abundant flow of urine each time, during the night, (the first six days.) Heat in the urethra, which, increasing gradually, becomes insupportable, (fifth day.) Urine passes by drops, with much burning, (fourth day.) Involuntary escape of urine in bed, at night, whilst asleep, at 5 A. M., (first night.) Urine more

copious than usual, (the first four days.) Very profuse urine, of a straw color, (first day.) Urine very much increased; he must pass water very frequently, and each time he discharges it in great quantity. Urine reddish, turbid, very abundant. Urine, on cooling, deposits a red sand. *Frightful hæmaturia from hemorrhoidal congestions in the bladder, retention of urine, paralysis of the bladder*; the catheter with difficulty breaks through the sanguineous clots, which slowly pass into the catheter, in order to escape with the urine. The patient, who, for forty-seven days, had in vain tried all other remedies, was cured completely in a few days. Sensation of painful constriction in the groins, extending round the pelvis. Painful sensation of constriction in the uterine region, which gradually extends upwards, and in a quarter of an hour reaches the stomach, and causes the sensation as of a great blow in the reins, that makes the patient cry out, after which it rapidly goes off, (on the first day, after taking one globule of the one hundredth potency.) Pain in the uterus and its ligaments, periodically returning every evening, and increasing gradually until 11 P. M., when it is much worse; it then ceases until the following evening, for many successive days, (after fourteen days.) Pulsating pain in the uterus and ovarian regions, like an internal tumor suppurating; the pain extends to the thighs, and becomes insupportable; then it ceases completely, and occurs on the next day at the same time, and so on for many successive days; (after fifteen days.) Very painful menstruation, accompanied by great prostration of strength; she is obliged to remain in bed for three days; (eighth day.) *Menstruation with most horrible pains, causing her to cry aloud, and to weep*, (fifth day.) Menstruation, which was usually preceded by very strong pains, comes this time without any pain, and very copiously. Menstruation eight days too soon, in a woman in whom it happened usually some days too late, (third day.) Menstruation scanty, which ceases when she remains lying down. Menstruation of black, pitchy blood, rather abundant. Labor suppressed for ten days, which recommences the first day of the administration of the remedy.

UPPER AND LOWER EXTREMITIES.

Formication and weight in the arms which cannot be raised freely; worse in the left arm. Œdema of the hands, worse in the left. Dry, scaly herpes at the outside of the right elbow, without itching, of one and a half inch in breadth, (thirtieth day.) A similar dry, scaly, herpetic eruption on the outside of the left elbow, (after forty-eight days.) Dry, scaly herpes, two inches broad, on the left internal malleolus, without itching, (after twenty-four days.) A similar dry, scaly herpes on the right internal malleolus, (after thirty-eighth day.) Violent itching on the ankles, (twentieth day.) Very violent itching, causing him to scratch the lower part of the tibia; (after twenty-one days.) Œdema of the legs up to the knees; the skin is shining, and pressure with the fingers leaves an impression for a long time. Œdema of the feet up to the inferior third of the legs, which soon goes off. He cannot rest still when sitting; he must throw his legs about here and there involuntarily.

GENERALITIES.

General weakness, with sadness and bad humor. General weakness, so that he does not venture to speak. Such great weakness, that he does not venture to do any thing, not even to walk through the room. Great weakness for many successive days; he does not venture to walk at all. Great corporeal depression; he does not trust himself to stand on his feet. Great prostration of strength, so that he must remain in bed, not feeling able to use his legs. General malaise, and such weakness as to be unable to rise from his seat. Depression and languor during the whole day. Great coldness at night, which lasts half an hour, (first day.) Slight chilliness towards 10 in the evening, (first day.) Slight shivering, which passes off quickly towards 2, P. M., (first day.) General chilliness, so severe as to make the teeth chatter, which lasts three hours, and does not go off, although he lies down, and covers himself over with many blankets, (first day.) Burning heat, which causes shortness of breath and madness, so that he cannot remain quiet in bed; this heat succeeds the chill of three hours' duration, and continues during twenty hours, (first day.) Scorching heat in the course of the night, with much pain in the head, great dyspnoea, and inability to remain lying, (first day.) Copious perspiration, which follows the hot stage, (first day.) Slight fever and pain in the head, which develops itself after a very short chill; it lasts but a short time, and terminates with slight perspiration at 4, P. M., (first day.) Quotidian intermittent fever, which recurs every day at the same hour for many successive days. At 1, P. M., a slight chill; then burning heat, dyspnoea, and very great pulsating pains in the uterine region, terminating in very slight perspiration. From 11, P. M., till 12, A. M., the next day, complete apyrexia, (after thirteen days.) Quotidian intermittent fever, not subdued by sulphate of quinine, is immediately checked. At 11, A. M., great coldness for two hours; then burning heat, with great dyspnoea, thirst, violent pain in the head, coma, stupefaction, insensibility, till 12, midnight, terminating in inextinguishable thirst, and very profuse perspiration. At 4, P. M., on the following day, complete apyrexia, and a feeling of comfort, as if in a perfect state of health, which lasts for seven hours. Then, at 11 A. M., the paroxysm returns again, and it recurs constantly for five successive days, and could not be cut off by quinine. Pulse completely lost for many days, in a man affected with chronic hypertrophy of the heart; immediately after taking the remedy, the pulsation returns with an irregular rhythm, and intermitting, as before.

DIABETIC URINE.—If a specimen of diabetic urine is allowed to stand exposed to the air, no matter for how long a time, it does not, like ordinary, emit any smell from decomposition. It has been supposed that this depended upon the formation of alcohol, but this is doubtful. It forms a very good test for diabetic urine when the physician cannot employ other means.

Miscellany.

MEDICAL MORTALITY.

Dr. Majer, in the *Bavarian Medical Journal* for September, 1863, combats the very common belief that poverty is conducive to long life. He quotes numerous instances, and sustains his position by referring to several eminent authorities, to show that wherever there is most poverty there is the greatest mortality. He asserts, on the calculations of Casper, that in Berlin the medium duration of life amongst the highest classes is fifty years, whilst among the indigent it is only thirty-two years. Out of a thousand of the newly-born nobles of Berlin, fifty-seven die during the first five years of life; but out of the same number of the newly-born of the poor class, three hundred and forty-five die in the same period. During epidemics, the lower classes are specially influenced and decimated. The learned professions, exercised by persons living in comparative comfort, are favorable to the duration of life. Of one hundred and fifty-two literary Frenchmen whose lives are collected, it is shown that the average duration of their existence was not less than sixty-nine years. Casper, dividing the professions according to the longevity of the members, states that the average life in the theological class is sixty-five years; in commercial men, sixty-two; in persons holding public appointments, sixty-one; in agriculturists, sixty-one; in military, men, fifty-nine; in lawyers, fifty-eight; in artists, fifty-seven; and in teachers, fifty-six. Medical men are a fraction lower in the scale than teachers. Thus, amongst the professions, theologians and medical men occupy the extreme rounds of the ladder of life.

In a report on the duration of life amongst six thousand eight hundred and fifty-seven people, representing twenty-two different professions, Dr. Neufville, of Frankfort, has found the mean duration of life to run as follows: Amongst ecclesiastics, sixty-five years and eleven months; teachers, gardeners and butchers, fifty-seven years and ten months; commercial men, fifty-six years and nine months; lawyers and financiers, fifty-four years and three months; medical men, fifty-two years and three months; bakers, fifty-one years and six months; carpenters, forty-nine years and two months; masons, forty-eight years and eight months; shoemakers, forty-seven years and three months; joiners, lock-smiths and blacksmiths, forty-six years and three months; tailors, forty-five years and four months; lithographers and typecutters in stone, forty years. Theologians and lawyers present the greatest number of deaths from old age. Medical men succumb specially to typhoid affections and to diseases of the circulatory system.

Dr. Escherich has calculated from a given number—viz., fifteen thousand seven hundred and thirty persons, of different professions

and ages, living in the kingdom of Bavaria in October, 1852, a series of results relative to the comparative value of life. He states that foresters show a retrograde movement greater than that of other callings at every age. Protestant pastors have more old men amongst them than has any other class, but the mortality amongst them is very considerable from fifty to sixty years of age; teachers in Bavaria are very nearly in the same position as Protestant pastors; lawyers have not a very marked mortality during middle life, but after sixty it increases remarkably, to decrease again after seventy. Roman Catholic priests from forty-five to sixty-five exhibit a mortality, in Bavaria, beyond all classes of professional men except doctors. Very few of these priests live beyond eighty years. Doctors never hope for a long career; they die, at all periods of life, in greater proportion than the members of any other profession. Their largest mortality occurs during the first periods of their career. Three-quarters of them die before forty, and ten-elevenths before sixty. Old men are rare in their ranks in Bavaria. The same holds good in England. Dr. Farr shows us that the annual rate of mortality per cent. among English physicians and surgeons of the age of twenty-five and under thirty-five was 1.184 in three years, or 0.215 above the average. These hard facts are but the reflected pictures of the hard overwork and the dangers with which our physicians have to contend all the world over.

ON ESERINE, THE ALKALOID OF THE CALABAR BEAN.

BY MM. A. VEE AND M. LEVEN.*

The author begins with pointing out that the *phytostigmine* of Jobst and Hesse only possesses some of the characters of an immediate principle, and is, in fact, a mixture of several bodies, of which the most considerable is a crystallizable body which they call Eserine. This is obtained in the following way, which, it is said, is a modification of the process of Stas for separating alkaloids in cases of poisoning.

Calabar beans reduced to a fine powder are exhausted by cold alcohol. The alcohol is carefully distilled from the tincture, and the extract is treated with a strong solution of tartaric acid. After some time, the mixture is diluted with water, filtered, and then supersaturated with bicarbonate of potash. The whole is now shaken with ether, and the ethereal solution separated, gives on evaporation the alkaloid contaminated with foreign matters. The extract is dried over sulphuric acid, and then re-dissolved in pure anhydrous ether, from which solution the alkaloid is obtained almost pure. Repeated solution in alcohol or ether removes all the impurities, but a little red coloring matter which obstinately adheres.

Eserine is a crystallisable solid of a faintly bitter taste, which is not immediately perceived. It is freely soluble in ether, alcohol and chloroform, and but slightly soluble in water. It crystallizes in thin

* Abridged from *Journal de Pharmacie, &c.*, January, 1865, p. 71.

rhombic plates, which are colored by polarised light. The aqueous solution has an alkaline reaction. The alkaloid is soluble in acids; the solution gives all the ordinary general tests for alkaloids. The solution acts powerfully upon the pupil.

DR. VERDI'S LETTER.

FULL PARTICULARS OF THE ATTEMPTED ASSASSINATION OF THE HON. SECRETARY SEWARD, HIS FAMILY AND ATTENDANTS.

WASHINGTON, April 21, 1865.

W. TOD HELMUTH, M. D.:

Dear Sir :—Your favor of the 16th, in which you request me to give you an account of the tragedy perpetrated in the family of the Hon. Secretary Seward, is just received. I am sorry that our first communication, since we met in Philadelphia several years ago, should be on a subject which our whole country so deeply deploras.

At nine o'clock, on the evening of the 14th inst., I had left Secretary Seward in a comfortable condition, and his family hopeful of his speedy recovery from an accident which he several days previously had met with; his horses having run away and dashed him from the carriage, fracturing his right humerus at the surgical neck, his lower maxillary below the angle, and generally bruising him about the face and neck. At a few minutes after 10 p. m., I was hastily summoned, by a colored boy, to attend Mr. Seward, his sons and his attendants, who were, as the messenger expressed it, "*murdered by an assassin.*" Two minutes brought me to the spot; I was the first medical man there. As I glanced around the room, I found terror depicted on every countenance, and blood everywhere. Among the bleeding men and terrified ladies I sought for Mr. Seward. He was lying in his bed, covered with blood, a fearful, gaping gash marking his chin and extending below the maxillary bone. His, probably, was the only countenance that did not express fear. Hastily I examined his wounds, and I had the joy to bring the first consolation to that anxious family, in announcing to them that his wounds were *not* mortal. The carotid artery and jugular vein had not been divided or injured. The gash was semi-circular, commencing just below the high bone of the cheek and extending downward toward the mouth, and then backward over the submaxillary gland, laying open the inflamed and swollen part of the face and neck, that had been injured by his previous accident. On examining further, I found another stab, under the left ear, wounding the parotid gland; but this cut, however, was not very deep. Mr. Seward had lost much blood, and I immediately applied ice, to arrest the bleeding temporarily; after which I was informed that Frederick Seward was in an adjacent room, also injured. I hastily went to him, and found him lying on a lounge, with blood streaming over his face. He had been wounded in several places—viz.: on the left parietal bone, just about the "parietal eminence;" on the left side of the frontal bone, just about the line of intersection with the parietal; with two other light

wounds in that neighborhood. The injury on the parietal eminence had evidently crushed the bone, as osseous spiculæ were taken out; but it appeared, however, that the internal table, even if fractured, was not depressed. He was not insensible, but could not articulate. In about an hour, however, after his wounds were dressed, he fell into a slumber, from which, for sixty hours, he could not be aroused. I had scarcely finished applying ice to arrest the hemorrhage, when I was told to look at Mr. Augustus Seward. I became then truly amazed. "What!" said I, "is there another one wounded?" His injuries, however, were comparatively light—one was from a blow with the butt-end of a pistol, on the upper and middle part of the forehead; the other a cut over the metacarpal bone of the thumb of his right hand. Here I was again requested to look at another man. My surprise ceased then—I became horrified. This was the man-nurse, a soldier in attendance on Mr. Seward. I found his wounds were four in number, all from the blade of a knife; three over the right scapular region, and one below it. It was evident, after a careful examination, that the scapula prevented the penetration of the frightful weapon into the chest. After giving to this patient the requisite attendance, I was called to see another man who was wounded. He had received but one stab, in the back over the seventh rib, very near the spinal column. The knife must have glanced off, as this cut was long but quite superficial; had it been direct, his right lung would have received an irreparable injury.

Such is the scene that presented. Now I will relate to you the circumstances I gathered of this horrible attempt at assassination.

At 10 o'clock, the bell at Mr. Seward's house was rung, and answered by the colored boy. As the door opened, a very tall man appeared, with a small package in his hand, saying that Dr. Verdi had sent him with a prescription for Secretary Seward, which he must deliver personally. The boy remonstrated with the man, saying that Mr. Seward was asleep, and that he (the servant) would take charge of the prescription. The man said: "No; I have particular directions, and I must deliver them myself." So saying, he walked up stairs, but treading very heavily, he was reminded by the boy, who was following him, to walk more lightly, in order not to disturb Mr. Seward.

Mr. Frederick Seward was at this time lying, dressed, on a sofa in his room (one adjacent to his father's), and hearing heavy footsteps, came into the hall and met the stranger, who attempted to enter his father's room. Frederick expostulated with him, declaring that his father was asleep and could not be seen. Evidently the young man saw mischief in the face of the assassin. Miss Fanny Seward, who was in her father's room, hearing the conversation outside, opened the door to ascertain what was the matter; but Frederick cried out to her to "Shut the door." It seems that for two or three minutes the assassin hesitated, or endeavored to enter without making a deadly assault upon Frederick; but meeting with determined opposition, he dealt several blows upon young Seward's head, apparently with a pistol, with the intention, probably, of disabling without killing him.

The door was then opened, and the murderer entered, pushing Frederick, already staggering, before him; then disengaging himself from his adversary, he asked Miss Fanny—"Is the Secretary asleep?"—at the same instant making a spring for the bed, where the unfortunate man sat, aroused with the frightful conviction of what was to be expected. The next moment the villain dealt him a blow with the deadly knife, which was so violent that (*fortunately*, we may say,) it precipitated him from his bed. In falling, however, he must have received the second blow on the other side of the neck. It must have been at this time that the man-nurse (having been absent at the hospital) returned and attacked the murderer, to prevent him from doing further injury to Mr. Seward. In the endeavor to restrain the ferocity of the assassin, the nurse was struck several times, as described above.

It was at the moment that the nurse and Frederick, who rallied sufficiently to still use his feeble efforts in behalf of his poor father, were struggling with this man, that Major Augustus Seward, awakened from sleep by the noise and screams of Miss Fanny, came into the room, thinking that probably his father was delirious and had frightened the attendants, or else that the nurse left to watch during the night was in some way misbehaving himself. The Major, seeing the struggle, and not at all comprehending the facts, took hold of the man (believing him still to be the nurse) and dragged him to the door. Of course the assassin took advantage of this, and dealing one blow on the head of the Major, (making, however, but a slight wound, and cutting his hand as aforesaid,) ran down stairs, followed by the Major, who did not know the condition of affairs until he came back to his father's room. The assassin then mounted the horse, which he had left before the door, and rode rapidly away.

There are three peculiar features to this case: First, had Frederick Seward said to his sister, "*Lock* the door," instead of "Shut the door," the assassin might never have been able to enter the Secretary's room. Second, had Augustus Seward understood that that man was an assassin attempting to murder his father, he would never have allowed him to escape, or perchance might have precipitated him down stairs, and then attempted to disable and arrest him. The third is this: The boy who followed the wretch up stairs, soon hearing that he was making an attack on Mr. Frederick, ran out, calling "Watch!" and "Murder!" and went as far as the corner of the street, only fifty yards distant, where there was a sentry on duty; the terrified lad told the sentry to hasten to the house, that there was an assassin attempting the lives of the family! But the sentry did not heed the boy, or thought he could not leave his post, else he would have been in time to present his bayonet to the flying assassin, and could have secured or killed him.

Mr. Ansel, the fifth person who was wounded, is a messenger in the State Department, and was sleeping that night over the Secretary's room, waiting for his turn of watching. Hearing the fearful screams of Miss Fanny, he (a *very weak-kneed* gentleman) was making his way out of the house as fast as possible, when, after having descended

a flight of stairs, he met the murderer, also on the landing. Mr. Ansel, however, endeavored to run *faster*; but the assassin, fearing he might give the alarm, gave him a memento of his brutality, by plunging the dagger into his back.

Thus ended that horrible tragedy, which took one-hundredth part less of time in perpetrating than my weak attempt at its relation.

Surgeon-General Barnes, Dr. Norris, U. S. N., and Dr. Wilson, Medical Director of this Department, came in to my assistance, and I must say, to their honor, that their energies united with mine only to save and relieve the victims, and not one descended to that petty, professional pique or ill-conceived pride of many practitioners, in reference to associating with a medical gentleman of a different school of therapeutics. Our intercourse, professional and social, has been mutually courteous; we met on the same field, inspired by the same ambition, to work together for the same end.

Hoping to hear from you again, under better circumstances, I remain,

Your friend and colleague,

T. S. VERDI.

—*Western Homœopathic Observer.*

PROBLEM IN ORGANIC LIFE.

BY F. VANDERBURGH, M. D.

The centre is as the circumference of its relations.

This problem holds equally good in inorganic matter as in organic life. The sun, with all its satellites, is the centre of the circumference of its relations. If in *organic life* we elevate the vital forces of the reproductive organs to their standard relations with the stomach and the two hemispheres of the brain, we have in these three focal centres the standing animus of the whole being. The stomach, with its eccentric axes and rotary force, (which an emetico-cathartic, proves to be centrifugal in both directions), is the radiating centre of these two vital forces, receiving their reflex actions in return, and at the point of equilibrium the primary force is receiving as many sensations from its two satellites as it sends off from its own centre.

Here we may take our stand point in organic life, as this *centre* so is the circumference of its relations.

This statement is so simple that it may be carried in the mind of any physician, and used at the bed-side of his patients. But as all these points differ in their rates of motion, it requires to be studied to be understood.

A slight morbid condition of the stomach may be in direct relation with a reflex action of the reproductive organs in both sections, and a passive abnormal condition of the stomach may be attended with a congestion of the brain.

This little problem was read before the Medical society in the city of New York two years ago. It has been a guiding star in my practice for many years, and I recommend it to young beginners who are just assuming the gravest responsibilities of human life.

Colleges and Societies.

HOMŒOPATHIC MEDICAL COLLEGE OF PENNSYLVANIA.

LIST OF GRADUATES, SESSION 1864-5.

Bancroft, Ephraim,	<i>Philadelphia, Pa.</i>
Bedford, Lyman,	<i>Buffalo, N. Y.</i>
Buck, John,	<i>Philadelphia, Pa.</i>
Clayton, Abram,	<i>Huntingdon Valley, Pa.</i>
Ehrman, A. H., M. D.,	<i>Cincinnati, O.</i>
Ely, Jairus Robert,	<i>Philadelphia, Pa.</i>
Gilman, William,	<i>Marietta, O.</i>
Gundelach, Charles,	<i>Belleville, Ill.</i>
Harvey, J. P.,	<i>Philadelphia, Pa.</i>
Lentz, Levi R.	<i>Vogelsville, Pa.</i>
Martin, Henry N.,	<i>Buffalo, N. Y.</i>
Martin, R. W.,	<i>Philadelphia, Pa.</i>
Neville, W. H. H.,	<i>Somerton, Bucks Co., Pa.</i>
Reynolds Hobert,	<i>Bridesburg, Pa.</i>
Rose, John F.	<i>West Philadelphia, Pa.</i>
Slough, G. B., M. D.,	<i>Easton, Pa.</i>
Tantum, Jos. R.	<i>Bordentown, N. J.</i>
Tucker, S. G.,	<i>Taunton, Mass.</i>
Willits, William,	<i>Muncy, Pa.</i>
Wilson, A. J.,	<i>Wilmington, Del.</i>

SPECIAL DEGREE CONFERRED ON

Boyce, C. W., M. D.,	<i>Auburn, N. Y.</i>
Wilson, David,	<i>London, England.</i>

Dr. D. Wilson has likewise been appointed by the Faculty of the Homœopathic College of Pennsylvania, as their especial agent in England, in regard to the acceptance of candidates for the Special Degree of our College.

THE HONORARY DEGREE CONFERRED ON

Knabe, P. Henry, Rev.,	<i>Elizabeth, N. J.</i>
Lemke, Gottlieb Liebrecht,	<i>Philadelphia, Pa.</i>
Stephens, Lemuel, A. M.,	<i>do. do.</i>

THE SPECIAL DEGREE WAS CONFERRED ON

Alabone, E. G.,	<i>London, England.</i>
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NEW YORK HOMŒOPATHIC MEDICAL COLLEGE.

The number of matriculants at the last session was 71. Prof. Beakley, who has been engaged as a medical lecturer for 12 years, says he never lectured to a more intelligent class.

LIST OF GRADUATES 1864-5.

Wm. W. Banker,	<i>New York City.</i>
P. Oscar C. Benson,	<i>Skaneateles, N. Y.</i>
B. F. Bowman,	<i>Mechanicsburg, Pa.</i>
L. W. Brown Jr.,	<i>Cleveland, Ohio.</i>
L. J. Gregg Barchard,	<i>St. Louis, Mo.</i>
Waltar R. Carr,	<i>Clinton Corners, N. Y.</i>
Wm. J. Calvert,	<i>Ann Arbor, Mich.</i>
D. A. Cheever,	<i>Pekin, Ill.</i>
Wm. B. Cowan,	<i>Galt, C. W.</i>
John H. Demarest,	<i>Washington Heights, N. Y.</i>
Wilmot H. Dickenson,	<i>Sennett, N. Y.</i>
James O. Emmett,	<i>St. Catherines, C. W.</i>
John N. Fairbank,	<i>New York City.</i>
Thomas S. Goodwin,	<i>Skowhegan, Maine.</i>
Clark T. Hamilton,	<i>Danburg, Ct.</i>
G. Fridine Hand,	<i>Binghamton, N. Y.</i>
Everitt Hasbrouck,	<i>Modena, N. Y.</i>
Wm. F. Hocking,	<i>Brantford, C. W.</i>
Henry How,	<i>Liberty, Mo.</i>
Jabey B. Hottby,	<i>Simcoe, C. W.</i>
Bernard Hund,	<i>New York City.</i>
Henry J. Jackson,	<i>New York City.</i>
George B. Kitcham,	<i>Tathill, N. Y.</i>
Charles L. Mahon,	<i>Smyrna, Del.</i>
George Palmer,	<i>London, C. W.</i>
John L. Peck,	<i>Bridgeport, Ct.</i>
David W. Pitts,	<i>Saratoga Springs, N. Y.</i>
Ira Remsen,	<i>New York City.</i>
Bradbury M. Richardson,	<i>Sutton, Vt.</i>
John H. Tegart,	<i>Scotland, C. W.</i>
Allen A. Tisdale,	<i>Simcoe, C. W.</i>
Moses E. Tripp,	<i>Ingersoll, C. W.</i>
Jason T. Wallace,	<i>Hartwick, N. Y.</i>
George P. Westland,	<i>London, C. W.</i>
Frederick L. H. Willis,	<i>New York City.</i>
Moses H. Walters,	<i>Lowville, N. Y.</i>
Lewis Whitney,	<i>Abbingdon, Mass.</i>
Winford York,	<i>Simcoe, C. W.</i>

American Institute of Homœopathy.

E. A. LODGE, M. D.: *Dear Doctor.*—The Sessions of the American Institute of Homœopathy, which have been suspended during the past four years on account of the disturbed state of the country, are this year to be resumed. The next meeting will take place at Melodeon Hall in this city, on the 7th of June proximo, and a preliminary meeting on the evening of the 6th of June, at the house of Dr. F.

Ehrman, No. 48 West 7th street. The general Secretary will, I presume, send notices to all members of the Institute, but there are many physicians not members who will undoubtedly be present if aware of it. In order to give as full publicity as possible to the fact of the proposed meeting, the Committee of Arrangements will be obliged to you, if a number of your Journal is issued between now and that time, to have a notice of the meeting inserted.

The physicians of Cincinnati will be happy to meet here at that time their brethren of other places, and make personally, as we have heretofore professionally their acquaintance.

Respectfully yours,

E. C. WITHERILL, *Chairman Com. of Arr.*

Cincinnati, Ohio.

THE ILLINOIS HOMŒOPATHIC ASSOCIATION has just closed its eleventh annual session at Chicago.

A committee of ten was appointed to memorialize the Legislature of Illinois for the legalization of State and County Medical Societies. A very good movement.

We will publish a report of proceedings in the next number.

The HOMŒOPATHIC PHYSICIANS OF OHIO hold their meeting at Columbus, on the 18th of June. The Michigan Homœopathic Institute is to meet on the same day at Detroit. We regret very much that both meetings have been appointed for the same day.

Personal.

DR. HORACE M. PAINE, recording Secretary of the New York State Homœopathic Medical Society, has removed his residence from Clinton, Oneida County, to 104 State Street, Albany, N. Y.

[A Homœopathic physician wishing to engage in country practice, will find Clinton a very desirable place of residence, on account of its delightful situation, its seminaries and schools, cultivated and refined society, and the well established confidence in the Homœopathic system, on the part of a considerable portion of its most influential and intelligent citizens. Communications in reference to this subject should be directed to the above address.]

DR. HENRY D. PAINE, formerly of Albany, has removed to 16 West Fourteenth Street, New York.

DR. GEORGE PALMER has located at St. Clair, Mich.

DR. S. B. THAYER has returned to Detroit to practice.

FIELD.—G. C. FIELD, M. D., of Woodstock, C. W., communicated to the "*Baptist Freeman*" of April 25, 1865, a very interesting article on the Assassination of President Lincoln.

DR. E. M. HALE will occupy the chair of Materia Medica and Therapeutics in the Cleveland Homœopathic College next Winter. We congratulate the College on the acquisition of his valuable services.

DR. J. B. CHESNEY, late of Kenton, Ohio.—Can any one favor us with his present address?

DR. H. P. GATCHELL has taken charge of the Kenosha (Wisconsin) Water Cure.

DR. RUDOLPH is still suffering from the effects of an accident at Toledo.

DR. JAMES C. HARRINGTON has located at Detroit.

DR. F. A. BENHAM has removed to South Bend, Indiana.

DR. L. V. ROUSE has settled at Dowagiac, Michigan.

Book Notices.

AN APPEAL UNTO CÆSAR; being an inquiry whether homœopathic physicians are quacks, charlatans, imposters, mountebanks, &c. By GEORGE E. SHIPMAN, M. D. Published by C. S. Halsey, Chicago.

Several allopathic physicians having, on the occasion of the trial of Surgeon Freer, given testimony in relation to homœopathy and its practitioners, of a highly objectionable character, Dr. Shipman undertakes to expose their fallacies. Wielding a keen scalpel he has made very clean work.

THE DISPENSATORY OF THE UNITED STATES OF AMERICA. By GEO. B. WOOD, M. D., and FRANKLIN BACHE, M. D., &c. Twelfth edition carefully revised. 1704 pages. Philadelphia, 1865. For sale at Detroit Homœopathic Pharmacy. \$10.00.

The decease of Franklin Bache, M. D., left the whole work of revision to Dr. Wood, who has executed the task with commendable industry and fidelity. The present edition retains the general features of the old, with addition of over one hundred pages of new matter. Among the changes we observe that *Gelseminum*, *Leptandria*, *Ignatia* have been taken from the list of unofficinal drugs, and given a prominent place among the leading medicines.

VALEDICTORY ADDRESS delivered at the fifteenth annual commencement of the Hahnemannian Institute of Philadelphia, March 1st, 1865, by Henry N. Martin, M. D. Published by request of the Institute.

A very readable paper.

MICHIGAN HOMŒOPATHIC INSTITUTE.

The Sixth Annual Meeting of the Michigan Homœopathic Institute will be held at Detroit on Tuesday, the thirteenth of June, 1865.

The Annual Address will be delivered by E. H. DRAKE, M. D.

The following Committees are expected to report at this meeting ;

ON PUBLICATION—Drs. E. A. Lodge, E. H. Drake, and N. B. Covert.

ON HOMŒOPATHIC PROFESSORSHIP IN STATE UNIVERSITY AND ON HOMŒOPATHIC COLLEGE—Drs. E. H. Drake, I. N. Eldridge, C. J. Hempel, Smith Rogers, J. M. Long, and G. T. Rand.

ON PROVING OF CHELONE GLABRA—Dr. A. R. BALL and Dr. A. B. Spinney.

ON PROVING OF ROBINIA PSEUDO-ACACIA—Dr. F. X. Spranger and Dr. P. B. Hale.

ON PROVINGS—Dr. L. M. Jones and Dr. C. A. Williams.

ON PATHOLOGY—Drs. E. H. Drake, A. H. Botsford and F. Finster.

ON HYGIENE—Drs. E. A. Lodge, A. W. Walker and Isaac Douglas.

ON SURGERY—Drs. E. R. Ellis, A. J. Sawyer, E. H. Drake and Smith Rogers,

ON OBSTETRICS—Drs. A. Walker, A. Bagley, S. W. Pattison and John Doy.

ON MEDICAL ELECTRICITY—Drs. Joseph Sill, E. L. Roberts and J. A. Albertson.

ON PHYTOLACCA—Dr. C. A. Jefferies, I. B. Tuttle and H. C. Bagg.

ON NITRATE URANIUM—Drs. H. T. Hawley, S. P. Marvin and Lewis Taylor.

ON DOSE—Drs. C. J. Hempel, J. R. Hyde, I. D. Craig and John E. Smith.

ON NEW REMEDIES—Drs. A. R. Ball, I. N. Eldridge, Orrin Fowle, S. N. Coons and A. Farnsworth.

ON EPIDEMICS—Drs. A. H. Botsford, C. J. Covey and John Doy.

It is particularly desired that there shall be a full attendance of the members at this meeting. EDWIN A. LODGE, *Secretary*.

EDITORIAL NOTE.

Many of our subscribers in sending their subscriptions, enquire in regard to the success of the enterprize. To all such we take pleasure in saying that the cash-paying subscription list is more than double the size that we expected to make it, and sufficiently large to furnish a profit on the publication.

We hope that all our subscribers who wish to add to the usefulness of the OBSERVER, will frequently contribute to its pages.

The present number has been delayed on account of our removal to a new store, and fitting up a printing office. Hereafter we expect to publish by the first of each month.

The article "*Substitute for irritating plaster*," on page 140, was inserted by mistake.

Materia Medica.

NOTES ON THE "NEW REMEDIES."

BY DR. RICHARD HUGHES,

I feel that all British homœopathists are deeply indebted to Dr. Hale for his very valuable contribution to our literature. The provings and the clinical facts he has collected in reference to the indigenous remedies of his country are a mine of wealth, and full of practical suggestiveness. We shall best show our appreciation of his labor by adding what we can to the edifice he has done so much to raise. Our younger colleagues, who are not yet engrossed in practice, may well fill up the many gaps still left in the provings of the American drugs. Especially do we need provings with minute quantities, by which the expulsive symptoms may be avoided, and the more delicate shades of action brought out. This has been done to some extent with *Æsculus hippocastanum*, *Cimicifuga racemosa*, *Eupatorium perfoliatum*, *Iris versicolor*, *Nuphar lutea*, *Podophyllum peltatum*, and *Rumex crispus*; but the other remedies mentioned in Dr. Hale's work have yet to receive this elicitation of their full action. Those of us who are in full work should test in the field of actual practice the numerous suggestions and indications scattered throughout the book, and report thereon in our journals. A collation of such provings and testings will then make Dr. Hale's second edition, which cannot fail soon to appear,* of tenfold value.

As a modest contribution to the clinical testings of the "new remedies," I write these notes. I have used the American medicines pretty largely in my practice for the last three years, and feel that in many of them I possess some of my most trustworthy therapeutic agents. The results of my trials I will briefly note down under the heads of the medicines in question.

ÆSCULUS HIPPOCASTANUM.

There are few medicines in the *Materia Medica* which have been more thoroughly proved, at least as to their crude action, than the horse-chestnut. Dr. Hale's article embodies the provings of fourteen

[* The second edition cannot be published until next year.—*Ed. A. H. Observer.*]

persons, of whom four were females. The main action of the drug seems to be on the alimentary canal, and this especially at its upper and lower extremities, the throat and the rectum. If its numerous throat symptoms be set down together, they will present a good picture of a kind of chronic angina not uncommonly met with, and which the standard remedies are not very efficient in curing. I have such a case now at the Dispensary, in which the dark congested state of the fauces, with its accompanying feeling of fulness and irritation, has quite disappeared in a few weeks under the *Æsculus*. Dr. Lee's proving, in the appendix, might seem to indicate this drug in acute tonsillitis; but I own that the causal connection between his symptoms and the two doses of the third attenuation taken by him is to me very problematical. His attack was such as any one might experience in the month of December without taking *Æsculus*.

The rectal symptoms of *Æsculus* point clearly to its remedial action in hæmorrhoidal affections. My experience with it here has been very satisfactory. It accords with the pathogenetic indications in defining the kind of piles against which *Æsculus* is useful. There is little tendency to hæmorrhage, but much sense of fulness and bearing down, with constipation. It acts best in those cases where the orthodox *Nux* and *Sulphur* seem indicated, but as sometimes happens, fail to cure. I have found it curative in both acute and chronic cases. The following is a good example of the latter. I give the narrative in the patient's own words. She is now about forty-eight years of age:

"I first began to suffer when thirteen years old. I fancy from being one of a great number of girls with small accommodation hence waiting and costiveness, the bowels only relieved once a week or so. I should say that constipation is hereditary on both sides. For a few years I was constantly taking medicine to relieve the bowels. The pain was nothing particular; and there was but a small protrusion. Matters grew worse from the age of twenty-five to that of thirty-four, when I was attacked with the first dreadful, very dreadful pain. I could not sit, stand or lie, the only possible position was kneeling. This lasted for many weeks in the winter; in the summer it was, as always, better. For about two years the pain was bad, off and on. I then used leeches, which eased the severe pain; but still it was bad. The next very severe attack was in 1862; it lasted for weeks, and returned again in 1863. The pain was like a knife sawing backwards and forwards, almost a martyrdom for agony. I took *Belladonna*, *Pulsatilla*, *Aconite*, and *Mercurius*, with no benefit; was recommended some stuff to apply, which relieved a little. Again in 1864, things became very bad, much pain, the bowels always wanting to be relieved."

In the November of that year I was consulted by this lady. I prescribed the *Æsculus Hippocastanum*, in the second centesimal dilution, three drops to be taken in a wineglassful of water, morning and evening. Her report continues—

"I then took the *Æsculus*. At the end of one week I was a degree better, after another, better still; and so on for a month. At the end

of this time I was wonderfully better. The medicine seemed to relieve the bowels, and cause the protrusion to be soft. I left it off for a time, and when the pain returned again at all badly, took the medicine and became relieved. I have taken nearly a bottle (two drachms) since November, on and off. I only take it when I am bad, and cannot sleep for pain. The protrusion always remains. I feel so grateful to you for the advice and relief given me."

I have written to recommend this lady to take the medicine regularly, and have every hope of its effecting an entire cure.

I use the *Æsculus* at the second centesimal potency. Both smaller and larger doses have been found successful in piles, as appears from Dr. Hale's records.

It might seem, from Dr. Burt's proving, that the *Æsculus* was indicated in certain cases of frontal headache and backache. But the indication is, I think, delusive; for in all the heroic provings for which we have to thank this gentleman the headache and backache appear. This may be seen in his experiments with *Caulophyllum*, *Dioscorea*, *Helonias*, *Hydrastis*, *Iris*, *Leptandria*, and *Phytolacca*. This uniform occurrence leads us to regard Dr. Burt's headache and backache as peculiarities of his constitution when out of health, rather than symptoms proper to certain drugs.

BAPTISIA TINCTORIA.

The special interest of this remedy lies in its power over certain kinds of fever. The authorities quoted by Dr. Hale consider it the great specific for all idiopathic fevers of whatever kind. We cannot but agree with him when he says: "It is doubtful if *Baptisia* is indicated in all fevers. It is one of the misfortunes of all schools of medicine, that when a new remedy comes up, it is seized upon by certain enthusiastic members of the profession; and they, losing sight of its specific indications, proceed to laud it in the most extravagant terms, as a panacea in all diseases."

In a former number of this Journal I have endeavored to indicate the special form of fever to which the pathogenesis of *Baptisia*, aided by clinical experience, points as its sphere of influence. It is in the first stage of the ordinary endemic fever of this country, known popularly as "gastric," and medically as "typhoid" or "enteric." In the first stage of this disease the patient has a hot, dry skin, and a quick, full pulse; the tongue is thickly covered with a "whitey-brown" fur; the head aches, and there is at least nocturnal delirium: the appetite is absent, and thirst great; the urine is high colored, and the bowels generally constipated. Unless the disease is checked in this stage, the true typhoid symptoms supervene, which I need not here describe. The point at which the "gastric" passes into the "typhoid" fever is generally, according to my experience, the change from constipation to diarrhoea.

Now there is nothing improbable in the supposition that if we could find a remedy perfectly homœopathic to the first stage of this malady, we might cure it there and then before the typhoid symptoms supervene. None of our ordinary remedies seem applicable. *Acon-*

ite is powerless against such fevers; it never reduces the pulse one beat, or relieves the skin by a drop of moisture. Arsenic is suitable only to the later stage of the disorder. Bryonia is the remedy usually administered; but, though better than nothing, it is difficult to see anything curative in its action. On the other hand, the pathogenesis of Baptisia, brief as it is, exhibits it as properly homœopathic to the condition I have described. And the result of my own experience in its use has been, that in the great majority of cases it cuts short the fever in this its first stage, freeing the patient from all the dangers of the second. I have never yet been disappointed in it. I give the first decimal dilution, one or two drops every two hours. Its curative action is often exceedingly rapid.

I have treated some cases of remittent fever in children with Baptisia, but have not found it to answer as well as Gelseminum and Pulsatilla.

CIMICIFUGA (ACTŒA) RACEMOSA.

This is evidently one of Dr. Hale's favorite drugs. It has been well proved and largely used. I confess, however, that up to the present time I am disappointed with it; and know of no forms of disease in which I feel confidence in its administration. I have lately treated a case of rheumatic fever in a puerperal woman with the drug throughout, and considering the dangerous nature of the disease at such a time, with satisfactory results. I gave drop doses of the mother-tincture. The relation of the Cimicifuga to rheumatism on the one hand, and to the uterine functions on the other, led me to its choice in this instance.

EUPATORIUM PERFOLIATUM.

I only mention this drug to recommend it to relieve one morbid affection; and this is the pains in the bones which accompany influenza. If given in alternation with the remedy specific to the whole condition—Arsenicum, Kali bichromicum or hydriodicum, &c.—it dissipates these distressing aching with great rapidity. I generally give it in the 1st dilution: but have found it act fairly in the potencies from the 2d to the 6th.

GELSEMINUM SEMPERVIRENS.

In the paper before referred to I mentioned three uses of Gelseminum in which I had learnt to feel great confidence. The first was "in disturbances of the cerebral circulation, of a congestive character." My friend Dr. Madden sends me from Australia the following case, which comes under this heading:

"A gentleman was sent to me by Dr. Wheeler, of Adelaide. He has had constant, gradually increasing headache for three or four months; dull heavy pain, extending to the nape of the neck, frequent throbbing in the temples, and vertigo on rapid movement. He was for a long time subject to constipation, which ceased when the headache began; and the bowels have been regular ever since. I gave Gelseminum, a drop night and morning. For thirty-six hours the headache markedly increased after each dose; then a sudden throb,

like a snap, took place in the centre of his head. The headache at once and entirely ceased, and has not since returned, but the bowels have again become constipated."

The second morbid condition of which I spoke was "painful spasmodic affections of the sexual system, male and female." I continue to derive the most brilliant results from the drug in dysmenorrhœa and after pains, when these are spasmodic and non-inflammatory. Its power over after-pains is so great, that the lying-in chamber is well-nigh-freed from one of its greatest bugbears. But it is antipathic rather than homœopathic to these conditions, and requires to be given in full doses—from three to ten drops of the first decimal dilution. These temporary pains are the very things for which Hahnemann himself has justified the use of antipathic palliatives :* and in the present instance we have the further advantage of using a remedy which acts as a special sedative on the affected part themselves, and not—like Opium—by stupefying the nervous centres.

I mentioned, in the third place, that Gelseminum acted much better than Aconite in the remittent fever of childhood. I continue to find it (in the first centesimal dilution) the best possible febrifuge in this common disorder. It has generally been supplemented by Pulsatilla for the gastric symptoms, and Nitric acid for the cough. The characteristics of the Gelseminum fever appear to be its remittency, the exacerbation occurring towards night, and its passing off without perspiration. In febrile states of adults, presenting these features, I have prescribed the Gelseminum with perfect success.

I have not as yet extended my use of Gelseminum beyond the morbid conditions above described, but Dr. Hale's exhaustive article gives many indications for its wider administration.

HAMAMELIS VIRGINIANA.

Hamamelis is a remedy whose use illustrates a principle I endeavored to establish in the last number of this journal; viz., that the true specific sphere of a drug may be determined *ex usu in morbis* alone. Hamamelis has never been properly proved, nor has it poisoned anybody; yet we know with great accuracy that its remedial sphere lies in the affections of the venous system. Dr. Preston, in some valuable papers in the "North American Journal of Homœopathy," was the first to establish this fact; and his reasonings were based almost entirely on clinical experience.

I have the greatest confidence in Hamamelis in phlebitis, in the various forms of varicosis, and in venous hæmorrhage. It is not always successful in phlegmasia alba dolens, but there is good reason to believe that in this disorder the mischief is as often in the lymphatics as in the veins. In varicose veins of the leg I conjoin its external

*" If *Opium* has been found to cure cough, diarrhœa, sickness, spasms, &c., in a few cases, it is only when these symptoms first show themselves in persons previously in good health, and are but slight. In such cases, as, for instance, in a trifling cough caused by a recent chill, the trembling arising from terror, &c., *Opium* will sometimes restore the patient quickly to health; because, if these symptoms are at once destroyed, the body is restored to its former condition, and the tendency to their return suppressed."—Pref. to *Optum*, *Mat. Med. Pura*.

with its internal use, laying strips of calico soaked in a weak lotion (one part to twenty) along the enlarged vessels, and supporting all with a bandage. The pain is relieved, and the veins much reduced in size. In "bleeding piles," the first or second dilution of *Hamamelis* is a most valuable remedy. In passive hæmorrhage from all parts, whether nose, lungs, stomach, or bowels, I have the utmost confidence in its use. I think that the hæmorrhages it cures depend rather on the state of the blood-vessels than on that of the blood. Its value in varicosis, and the absence of any report of its curative action in purpura, point in this direction. The following, moreover, is a case in point:

"I was treating a young lady, suffering from a complication of disorders, amongst which were almost daily epistaxis and throbbing headache. To check the epistaxis, I put a few drops of the mother-tincture of *Hamamelis* into a tumblerful of water, and ordered a dessert-spoonful to be taken alternately with the *China* which was being administered for the headache. The first dose of *Hamamelis* was followed by flushing of the face, with most distressing throbbing, aching, and sense of fulness in the head. These symptoms gradually subsided, and the intermediate dose of *China* was taken without any appreciable result. The second dose of *Hamamelis*, however, was immediately followed by the same symptoms as at first, the head feeling as if it would burst. I stopped the remedy, and the epistaxis recurred next morning as usual. In a day or two I resumed it, giving it in the third decimal dilution. Again the dilatation of the cerebral vessels took place, though the symptoms were not so severe as on the first occasion. This patient has proved very sensitive to all medicines; but I see no reason to suppose the effect of *Hamamelis* upon her to be exceptional otherwise than as regards quantity.

In menorrhagia, I think *Hamamelis* less often useful than *Ipecacuanha*, *Sabina*, and *Secale*. In hæmaturia, also, it yields to *Terebinthina* and *Ferrum muriaticum*; probably because this hæmorrhage is dependent more frequently on the state of the renal or vesical tissue than upon that of their bloodvessels.

HYDRASTIS CANADENSIS

My chief experience with this drug has been in the treatment of constipation; for which it is a precious remedy, far superior to the *Nux Vomica* usually prescribed. It is in cases where constipation stands alone, or is itself the cause of the other existing ailments, that I find the *Hydrastis* so valuable. I have used it in the potencies from the first to the sixth (decimal); the second has seemed to me to act most satisfactorily.

The results I have obtained from *Hydrastis* in cancer have not been encouraging. I have, however, effected much benefit by its persevering use, externally and internally; in chronic indolent ulcers.

IRIS VERSICOLOR.

The article on *Iris* is one of the best in Dr. Hale's book. It contains one of Dr. Burt's heroic provings with large doses; some provings with dilutions, conducted by Dr. Rowland; two case of pois-

oning (in animals), with autopsies; and numerous clinical items. The Iris ought to become one of our most frequently used medicines.

My own experience with it had been gained prior to the appearance of Dr. Hale's work; and has been solely in the directions indicated by Dr. Kitchen, in one of the early volumes of the *North American Journal of Homœopathy*. I have been able to confirm his experience of its great value in "sick headache." Dr. Hale, I think, is right in saying, "It seems most likely to be indicated in those sick-headaches of a gastric or hepatic origin; in the purely nervous sick-headache, or that variety arising from congestion, other remedies may prove more useful."

But the most valuable property of Iris is that to which its powerful emetic and purgative action points, viz., its control over acute vomiting and diarrhœa. The summer diarrhœa last year was exceedingly severe among young children. When neglected, symptoms of cerebral exhaustion supervened, which always proved fatal. I lost four cases from this cause. When taken in time, I was always able to cure the acute symptoms; though the action of the China, Veratrum, Mercurius, &c., was not so rapid as with adults similarly affected. As soon as I began to use the Iris, however, the scene was changed. The vomiting never failed to stop, even in the worst cases, after the first dose or two, and the purging soon followed suit. I gave the second and third decimal dilutions. If this severe diarrhœa should recur next summer, I shall feel inclined to give Iris alone, and from the commencement. In English cholera it would probably be an efficient remedy, and might stand near Veratrum in the list of remedies against the epidemic cholera itself.

PHYTOLACCA DECANDRA.

The interest of this drug lies in three aspects of its operation—first, its power over periosteal rheumatism; second, its specific action upon the mammary glands; and third, its probable efficacy in affections of the throat.

I have not had much experience with it in periosteal rheumatic affections; I have occasionally used it instead of Mezereon, of which it seems a striking analogue. It has seemed to act well. In one case it was of much service, as its administration obviated any injury which might have resulted from a necessarily obscure diagnosis. In a baby of a few months old, a succession of restless nights occurred simultaneously with the development of a hard tender swelling about midway between the nipple and the sternum, but nearer the latter than the former. Whether the inflammation was affecting some of the elements of the undeveloped mammary gland, or whether it lay in the periosteum of a rib, seemed doubtful. In any case, however, *Phytolacca* was indicated. I gave it in the sixth dilution, and the malady rapidly disappeared.

I have not yet tried it in acute mammary abscess, for which it bids fair to become the leading remedy; but in two or three instances of non-malignant mammary tumor it has not appeared to exercise any influence. I purpose giving it a fair trial in diphtheria, for which it

is strongly recommended. *A priori*, indeed, it is difficult to see what relation a drug like *Phytolacca* can bear to so virulent a blood poison as that of diphtheria. But our means of controlling this terrible disease are as yet so inadequate, that I should gladly test any new remedy with a fair claim to efficacy.*

PODOPHYLLUM PELTATUM.

My experience with this drug is limited to its action on the alimentary canal and its associated viscera. There is one form of that very vague affection known as "biliousness," in which it is very useful. This is characterised by sickness and giddiness, bitter taste and rising, tendency to bilious vomiting and purging, and dark urine. Podophyllin, from the first to the third trituration, has generally rapidly removed these symptoms in my hands. On the other hand, when "biliousness" means dull pain in the right hypochondrium, pale and costive motions, loss of appetite, and depression of spirits, it will resist Podophyllum, and yield pretty quickly to the third decimal trituration of *Mercurius solubilis*. I cannot, therefore, agree to the generalization which styles Podophyllum "the vegetable Mercury."

What is the precise nature of the physiological action of Podophyllum upon the biliary apparatus seems to me very doubtful. It is certain, however, that it exerts a specific action of an irritant nature upon the alimentary mucous membrane, especially upon that of the small intestine and the rectum. Our provings are confirmed in this particular by the experiments of Dr. Anstie on animals, recorded in the *Medical Times and Gazette* for 1863. I have found it act very well in a case of chronic duodenitis. In inflammatory irritation of the jejunum and ileum, it is invaluable, for I know of no potent drug which affects, specifically, this part of the alimentary canal. The influence of Arsenic and Kali bichromicum becomes weaker as the duodenum is passed, to be renewed in the case of the latter at the colon, with the former hardly till we reach the rectum. *Mercurius corrosivus* affects the large intestine only. Podophyllum might be cautiously tried in the enteric lesion of typhoid fever, with which it has at least a local affinity. The same reason which makes it so valuable in affections of the small intestine renders it unsuitable in ordinary dysentery, which has its seat in the colon. In cases, however, where a dysenteric diarrhoea appears to depend upon inflammatory irritation of the rectum, Podophyllum will give rapid relief. Such a malady is not uncommon in children, and is accompanied with painful prolapse of the rectum at each stool. Here I give Podophyllin at the third trituration; but in the simple prolapsus ani from debility of infancy and childhood, I have almost invariably seen beautiful results from the tincture of Podophyllum in the twelfth dilution. In the same form, following Dr. Jeanes (see Hale, p. 346), I have given it

* Whilst these sheets are passing through the press I have had an opportunity of treating a case of diphtheria, in an advanced stage, and hitherto under allopathic treatment, with *Phytolacca*. At first it seemed to do good, but only for a short time, for the case terminated fatally four days after I first saw her.

with perfect success in cases where, in children, the stools are too large and frequent, but natural in color and consistence.

RUMEX CRISPUS.

I would call attention to the remarks of Dr. Carroll Dunham on the action of this substance on the air passages, cited by Dr. Hale at p. 361 of his book. It is a model of delicate application and discriminative comparison. Nor is it fanciful; for I have never seen any curative action so prompt and certain as that of *Rumex crispus* over the cough described by Dr. Dunham. Twice already I have seen an incessant racking cough of days' duration extinguished by one or two doses of the sixth dilution of this drug. I give it thus high, because the provings of the drug which have led to this use of it were instituted with very small doses.

I hope that these few notes may stimulate others towards the clinical verification of the provings of the new remedies, while they serve in themselves as a slight contribution towards this object,—*British Journal of Homœopathy*, No. 92.

DR. HEMPEL'S MATERIA MEDICA.

A New and Comprehensive System of Materia Medica and Therapeutics, arranged upon a Physiologico-Pathological basis, for the use of Practitioners and Students of Medicine. By CHARLES J. HEMPEL, M. D., second edition, revised and considerably enlarged. 2 vols.

The work of Dr. Hempel, whose somewhat ambitious title we have transcribed above, is by this time well known to British homœopaths. The new edition, besides being more convenient in form, presents several improvements. The first volume, which comprises the remedies ranked by Dr. Hempel as polychrests (in some instances, as *Helleborus*, *Opium*, and *Ferrum*, very questionably) is substantially unchanged. But in the second volume there are many additions. Enlargement, more or less considerable, has been made in the articles on *Asafoetida*, *Agaricus*, *Asarum*, *Artemisia*, *Berberis*, *Camphora*, *Capsicum*, *Carbo vegetabilis*, *Cina*, *Crocus*, *Clematis*, *Cyclamen*, *Croton*, *Euphrasia*, *Indigo*, *Kreasote*, *Ledum*, *Magnesia*, *Menyanthes*, *Millefolium*, *Natrum carbonicum*, and *sulphuricum*, *Nux Juglans*, *Oleander*, *Ranunculus bulbosus* and *sceleratus*, *Ratanhia*, *Rhododendron*, *Ruta*, *Sabadilla*, *Sambucus*, *Senega*, *Tabacum*, *Taraxacum*, *Terebinthina*, *Thuja*, *Valerian*, *Verbascum*, and *Zincum*. *Copaiba*, *Coccus*, *cactus*, *Coccionella*, *Manganum*, *Jatropha*, *Naja*, *Sumbul*, *Thea*, and *Urtica Urens* are treated of for the first time. Three cases of gangrene are cited in the article on *Lachesis*, to which Dr. Hempel formerly denied any curative virtue. Lastly, the index has been much enlarged, and serves the function of a repertory to the two volumes. These changes have unquestionably much enhanced the value of the work; and may well induce those who do not already

possess it to add it now to their libraries. The faults which, to our thinking, still remain will be discussed further on.

We have no intention, in the following review, of giving any account of the contents of Dr. Hempel's book. But we shall endeavor, to the best of our power, to exhibit its merits, to point out its faults, and to estimate its value on the whole as a contribution to homœopathic literature.

A treatise on *Materia Medica* has hitherto been expected to give four kinds of information regarding the substances used in medicine. The first embraces their natural history, their physical and chemical characters, and so forth. The second treats of their physiological or pathogenetic action, so far as this is known. The third division consists of a history of their uses in medicine, and an estimate of their real value, according to the latest knowledge. The fourth comprises this mode of preparation for medicinal purposes, and the doses of the various forms under which they are administered. Until lately, at least, the physiological portion of the old-school treatises on *Materia Medica* has been the least elaborated of the four, while, on the other hand, the "*Materia Medica*" in the mouth of a homœopathist, means the record of the symptoms produced on the healthy body by the various natural substances, that is, the physiological portion only. Were this record, indeed, exhaustive, it might be fairly argued that we had no need of the third, or clinical portion. The application of the rule "*similia similibus*" would in all cases enable us to select the proper remedy for a given case of disease, without regard to what others have done before us. But since the whole number of existing remedial agents has surely not yet been pressed into the service of medicine, and since, even of those we use we have in most instances but an imperfect knowledge, we are obliged to make large use of clinical observations in our choice of remedies. Even where the indications of pathogenesis are pretty plain, the *usus in morbus* is nevertheless a valuable verification. In many cases it converts the merest hint into a solid fact, and in many more where pathogenesis is silent it is our only guide to the specific employment of our means. So that the clinical must go side by side with the physiological account of the elements of our *Materia Medica* as necessarily, though in inverse ratio, as it does in that of the prevailing school.

The feeling of this need is evidenced by the writings of Hahnemann himself. The brief therapeutic indications of the introductory remarks prefixed to each drug in the "*Materia Medica Pura*," have expanded into a long list of the symptoms which have been removed by each medicine in the "*Chronic Diseases*." It is seen in the compendiums of Jahr and of Noack and Trinks—the former indicating in his list of symptoms those which have been removed as well as caused by the drug, and inserting many which have merely belonged to the cases it has cured—the latter prefacing the article on each medicine with a catalogue of the forms of disease in which it has proved curative. And it has characterised well nigh all the post-Hahnemannian

"provings," few of which have been published without an accompanying narrative of cases treated by the remedy in question.

In some respects, therefore, a homœopathic treatise on *Materia Medica* differs little in form and order from such works as the English of Pereira, the French of Trousseau and Pidoux, the German of Dierbach, and the American of Wood. The disproportionate value, however, which we assign to our physiological portion causes a difference. The record of the pathogenetic effects of our remedies must ever stand alone. In its entire detail it can never form part of a treatise; and that true homœopathic practice may become perfected, it is better that the materials for the pure application of our practical rule should be unmixed and remain apart. The action of the new American Publishing Society in this direction, is worthy of our best support. If successful, their collection will supersede all existing manuals and symptom-codexes, and only need occasional appendices to be a standing pathogenetic cyclopædia.

Having this, what do we need? Well, we need a clinical chapter on each drug. Its history as a therapeutic agent must be detailed, and its ancient and modern uses described. A full account should be given of all the recorded experience of its action in the hands of practitioners recognising the rule of homœopathy. To this should be added any cases in which its successful use in the hands of others has seemed to arise from its dynamic and specific properties. But, besides such a clinical account, we need certain work done in the physiological department of the subject.

First, a catalogue of pathogenetic symptoms, however well arranged, is to a true pharmacology what a description of a given disease is to pathology. The symptoms are only the phenomena; and it is the prerogative of science, and the necessity of the human intellect, to pierce beyond phenomena, to apprehend their meaning, to ascertain the laws and even the cause of their occurrence. Pathology does this with the phenomena presented by the body in disease. Pharmacology must do it with its phenomena while under the influence of drugs. Not otherwise can it form a worthy mate for its fellow-science, and with it produce the goodly offspring—Therapeutic Art. Little has yet been done in this direction; and we cannot credit Dr. Hempel with much addition to our knowledge on the subject. But—

Secondly, there is a work to be done for the *Materia Medica* corresponding with that which the lecturer on the Principles and Practice of Medicine does for disease. We do not turn our students loose into the hospital wards, with no previous acquaintance with the kind of phenomena they are to meet there. We know that they would be burdened and bewildered by the numerous forms of disease, and would probably shrink back in despair from the task of acquiring their knowledge. We bid them in the first instance attend a course of lectures on the subject. They hear therein the phenomena of disease classified and arranged. Certain definite groups of symptoms, of more or less uniform occurrence, are ticketed with nosological names. Other morbid processes of regular order and sequence are referred to the operation of certain morbid poisons. The facts of anatomy and

doctrines of physiology are used to illuminate the workings of disease, and the instruction is completed by an account of the remedial means in use for the various forms of disorder described. If the student stopped here, indeed, he would make a poor practitioner. But let him now face the interminable phenomena of actual disease, and he will be tenfold better equipped for its understanding than before. He has a clue to the maze; everywhere he sees connections and relationships. The effects of the remedies he sees given throw further light. He is in a fair way of becoming acquainted with disease.

We do not think that Dr. Hempel will complain of us if we say, that it is just this use which is subserved by his work now before us. Indeed, its form appears to indicate that it was originally delivered in a series of lectures to the *Materia-Medica* class of the Homœopathic Medical College of Pennsylvania. What it was originally it still remains; it is an introduction to the study of the *Materia Medica*. It endeavors to group and arrange the pathogenetic symptoms of each drug, to make their features plainer by the relation of cases of poisoning and of post-mortem investigations, and to illustrate their bearing upon disease by accounts of their clinical use and suggestions as to their further applications. There is no other work in existence which attempts to do this; and we owe Dr. Hempel a debt of gratitude for his labor to supply this want. His book is indispensable to the student and to the beginner in homœopathic practice, while its collection of cases of poisoning and of clinical experience with the various remedies is useful to all of us. If we go on to speak of its defects, it is in no spirit of carping complaint; but simply that a book which for some years to come must supply our want in this particular should be as perfect as possible. We have found Dr. Hempel's contribution to our knowledge so good, that we cannot but wish to try to make it better. Let him pardon us, then, when we ask him to consider a few matters wherein we think his work capable of improvement.

1. Dr. Hempel's *New System of Materia Medica* purports to be "arranged on a physiologico-pathological basis." We do not agree with those who doubt the possibility or the advisability of so arranging the *materia medica*. But we do feel entitled to demand of one who attempts it that his physiology should be sound, and his pathology brought down to the latest advances in this science. Now the first attempt at pharmacological speculation we met with in Dr. Hempel's pages proceeds upon physiological doctrines which the first year's student must know to be incorrect. We are told that Aconite "is endowed with a specific capacity of inducing a spasmodic torpor of the tissue of the terminal capillaries." Now, the capillaries are mere channels in the tissues; their walls, if they have any, are composed of basement membrane simply. Hence "spasmodic torpor of their tissue" is an impossibility; and the speculation which follows is utterly useless. "The first effect of this spasmodic torpor is to cause arterial capillary engorgements. We have not yet succeeded, in spite of our microscopic investigations, in determining the true character of capillary circulation; but it seems to be generally admitted that the terminal capillaries of the veins inosculate with the capillaries of the

arteries, and that the circulation is carried on in this manner. Now, if these capillaries are closed or only contracted, torpid or semi-paralysed, similar to what we may suppose to be the effect of cold, what must be the effect of such capillary stagnation upon the general circulation? The necessary and unavoidable consequence must be to induce, as I have said before, arterial engorgements. The arterial ramifications, as they approach the capillaries, must necessarily swell up in consequence of this influx of blood, which is deprived of its natural outlets, and we have precisely such a condition as we term congestion or inflammation."

The truth which lies behind this unphysiological speculation seems to be that Aconite influences, through the medium of the vaso-motor nerves, the calibre of the arterial channels generally. Hence its marvellous control over all morbid states in which the ballance of the arterial system is disordered. But that it influences generally throughout the body the capillary circulation and the nutrition of the tissues, so as to be able to cause, and hence to cure, true inflammation of any part, is probably what Dr. Hempel means, but what he does not say, and what we see no reason for believing.

Dr. Hempel's pathology seems to be that of the German professor, Schœnlein. We have no desire to detract from the merits of this distinguished man; but pathology is a growing science, and what was good for the last age may be obsolete in the present. For instance, what is "neuralgic inflammation," of which we read ever and anon in Dr. Hempel's pages? And is Dr. Hempel responsible for the adoption or the invention of the following extraordinary piece of pathology? After mentioning some of the urinary symptoms of Mercury, he goes on to say: "These symptoms, coupled with the fact that Mercury causes the secretion of increased quantities of watery urine, far surpassing in quantity the amount of beverage drank, might lead us to employ Mercury in that distressing malady *Diabetes mellitis* (sic) or *Albuminuria*." We might have hoped that there was a printer's error here, but for its reproduction unchanged in the revised second edition.

2. We find a corresponding deficiency in the pathogenetic and clinical portions of the work before us. Save for a few exceptions, we could fancy that the clock of Dr. Hempel's mind had stopped some ten or fifteen years ago. The later pathogenetic and clinical records of our school seem as little known to him as the physiological researches of Brown Sequard, or the discoveries in hepatic pathology of Claude Bernard. Thus, in the article on Tartar-Emetic, its power of inflaming the lungs is questioned, and the authority of Pereira is invoked, who says, "In cases of poisoning by this substance, no mention is made of difficulty of breathing, cough, pain, or other symptoms which could lead to the suspicion that the lungs were suffering?" Yet in the thesis of M. Manin, of which a full account is given in the sixth volume of this Journal, Dr. Hempel will find these very symptoms, together with inflammatory fever, to have been elicited by doses of from one twelfth to one sixth of a grain of the drug, taken by a healthy person for the purpose of proving it. Again, under Arsenic,

no mention is made of its supreme reputation in modern old-school practice as a remedy for chronic disease of the skin. Atropine has a few lines devoted to it at the end of the article on Belladonna, but no reference is made to the valuable clinical indications which Dr. Casper has given us for its use. The pathogenesis of Bryonia, is described without any account of Dr. Curie's late experiments with it on animals, or of its re-proving by the Austrian Society. A similar neglect appears in the case of Natrum Muriaticum. Under the heads of Digitalis, Iodine, and Hydrocyanic Acid, some use might have been made of the contributions to our further knowledge of these drugs which have lately appeared in this Journal. It is too bad to see the article on Phosphorus transferred unchanged from the first edition to the second, when between the dates of their appearance, Dr. Sorge's exhaustive treatise on this medicine has seen the light. Much the same may be said as regards Bahr's essay on Digitalis. Dr. Curie's experiments on tuberculization with Drosera, whatever be their value, might at least have been noticed *apropos* of that drug. The article on Kali Bichromicum is shamefully short. Here is the best proved drug since Hahnemann's time, proved both in England and in Germany, having an extensive clinical experience in many most important diseases; and Dr. Hempel discusses it in about a page and a half. His prejudice against the serpent poisons might excuse his light regard of Dr. Russell's admirable proving of Naja; but this neglect of the Bichromate of Potash makes us fear that the American political feeling towards the old country has with Dr. Hempel coloured also the scientific prepossessions,—“standing where it ought not.” Another strange instance of neglect is the treatment of Teste's *Materia Medica* in this work. Dr. Hempel himself gave us the translation of Teste's book, and ushered it into the world with a highly commendatory preface. It is one of the most original and suggestive works in our literature; and whatever be the author's errors, no one can have used Ledum and Croton, Kreasote and Corallia, Rhus and Lobelia in the directions indicated by him, without feeling deeply indebted to his labors. But here, were it not for two or three unimportant references, Dr. Hempel appears to ignore Teste's existence. Lastly, a silence almost entire preserved regarding those indigenous remedies of Dr. Hempel's own country, which have been of late years so largely used in homœopathic practice. Cimicifuga Racemosa even seems known to him only from the thesis of one of his own graduates. In a word, the post-Hahnemannian experience, pathogenetic and clinical, has yet to be worked up by Dr. Hempel into the texture of his book.

3. The third matter in which we desire to see improvement in Dr. Hempel's work, has regard to his treatment of the “antipsorics.” The ground he takes up in declining to go into the pathogenesis of these substances, is fair enough. He disbelieves in any effect being produced upon the healthy body by infinitesimal doses. The provings contained in the *Chronic Diseases* were, in all probability, instituted mainly with the thirtieth dilution. Dr. Hempel, therefore, feels no confidence that the interminable array of symptoms supposed to have

been elicited, are to be depended upon; and confines himself to an account of the curative virtues of the drugs. Whether he is right or not in taking this course, is a fair question; but our cause of complaint against him does not lie in this direction. We complain that he has allowed his prejudice against the provings to prepossess him against the medicines themselves, and that his clinical account of them, which in the absence of pathogenetic knowledge should have been especially full, is, on the contrary, especially scanty. Thus, under *Calcarea*, nothing is said of its power over nasal polypus, chronic diarrhoea, and pulmonary phthisis; and its use in the various forms of scrofula is dismissed in a few lines. *Hepar Sulphuris* has only half a page devoted to it; and even its familiar name is disguised under the title of *Calcarea Sulphurata*. Some amendments are made to *Carbo Vegetabilis* in the second edition; but *Lycopodium*, one of the most valuable drugs in the treatment of chronic diseases, is credited with little more than its influence in the crude state upon the urinary bladder. *Sepia* is dismissed with a page, (thirty-two pages are assigned to *Agaricus*), and the student would never learn from Dr. Hempel that it stands first among the remedies for leucorrhœa. *Silicea* would have had hardly more space, but that in the second edition a case is cited from Grauvogl, in which an enchondroma of the hand was cured by the sixth dilution of this remedy. Why should we not have Dr. Dudgeon's case in this Journal, in which it proved so strikingly curative of inflammation of the lachrymal sac, or any other of the numerous instances of its efficacy to be found in our literature?

The remarks we have made upon Dr. Hempel's treatment of the antipsorics extend also to his mode of exhibiting such remedies as *Lachesis* and *Apis*. His prejudice against these agents is derived not only from the way in which they have been proved, but also from their supposed incapability of affecting the system when absorbed by the alimentary mucous membrane. So that he unwillingly assigns a good therapeutic virtue to *Apis*, but in his first edition utterly denied the curative power of *Lachesis*. In his second edition he a little modifies his tone. He cites three cases of gangrene in which the remedy in question proved efficacious; and, admitting them as "fair illustrations of the curative power of *Lachesis* in traumatic gangrene," proceeds as follows: "We do not believe that if, instead of endeavoring to foist *Lachesis* upon the profession as a sort of universal panacea, its advocates had confined its therapeutic use to traumatic gangrene, *which constitutes the legitimate sphere of this poison*, the scepticism which now weighs down its claims as a remedial agent would ever have been excited in the minds of our physicians?" Dr. Hempel must surely be aware that cases quite as good as those he cites can be brought forward to shew the efficacy of *Lachesis* in malignant angina, in affections of the heart, in inflammation of the cæcum, in chronic headaches, and a variety of other disorders of the blood and the nervous system. And what shall we say to his treatment of *Naja Tripudians*? No one can read the record of the provings instituted by (we quote Dr. Hempel) "Drs. Rutherford, Russell, and Stokes" (N)

without feeling deep interest as in each prover the characteristic symptoms of the head, throat, larynx, heart, and intestines manifest themselves with greater or less intensity. Yet these admirable experiments "do not," according to Dr. Hempel, "seem to have yielded any very marked results." A brief summary of the symptoms elicited by Dr. Stokes is all that is given, and not a word is said of the cases of headache, angina, and heart-disease, in which this drug has proved so valuable.

4. Our last cause of quarrel with Dr. Hempel is this, that in the clinical portion of his book, too little proportionate space is assigned to homœopathic experience. Frank's magazine is cited wholesale; but very little use is made of Ruckert and Beauvais. The journals of the old school are ransacked for cases; but the European and American homœopathic periodicals seem to be to Dr. Hempel a sealed book. Now this is not as it should be. We are at last to complain of the free use of old-school experience. In many ways it is of the utmost value. But it is often very questionable whether the curative effects of crude doses represent the true specific action of the drug. There are mechanical and chemical, as well as dynamic actions in most medicinal substances; and the dynamic effects themselves are sometimes indirect rather than immediate. On the other hand, a cure wrought by an attenuated medicine is unquestionably an addition to our knowledge of its use as a homœopathic remedy, and is proportionately more valuable. We think, then, that in such a work as Dr. Hempel's the experience of the old school should be used only in the absence of recorded homœopathic results, or as a confirmation of these when existing. This mode of proceeding is important also as regards the matter of dose. There are some remedies--as Quinine for ague, and Mercury for syphilis, and Opium for lead-colic—which, although perfectly homœopathic to the disease they cure, seem unable to vanquish it except when given in material doses. So long as we have nothing but allopathic experience of the efficacy of other remedies, we have no means of knowing whether they belong to this category, or whether like most of our medicines, they act best when at least to some extent attenuated.

We ask, then, of Dr. Hempel, should he have another opportunity of revising his work—

1st. To modify the physiology and pathology he learnt as a student in favor of the fuller knowledge of the present day.

2nd. To introduce in their proper places the numerous pathogenetic and clinical records of the last fifteen or twenty years.

3rd. To give a fuller account of the curative results which have been obtained from the antipsorics and the serpent-poisons.

4th. To make a larger proportionate use of homœopathic clinical experience.

Again we say, we point out these deficiencies in no spirit of carping complaint. We have little doubt that, had we ourselves compiled such a work, there would have been as much or more fault to be found with us. We have no sympathy with the spirit which is content to stand idle itself, while it exclaims bitterly against the errors com-

mitted by those who stand forward to do the work that must be done. Dr. Hempel's labors, with all their faults, will embalm his memory in ages yet to come when the very names of his detractors will have sunk into oblivion.—*British Journal of Homœopathy*.

OBSERVATIONS

On Tupa-Kihi—Cava—Quillaia—Phytolacca Octandra—Diödon (Poisonous Fish)—Strychnia: Its effects on Cokatoos—Apparent Immunity of Pigs from the Poisonous effects of Strychnia.

[Communicated by Dr. SHERWIN.]

SYDNEY, 21st January, 1865.

I forwarded by the ship *La Hogue*, per favour of the Rev. Wm. Spencer.

(1) (*Tutee*) *Coriaria*—*Cor. Ruscifolia*, or *Cor. Tormentosa*—*Tupa-Kihi*—*Tutee*—*Indigenous to New Zealand*.

It is called "Tupa-Kihi" by the New Zealanders, because persons under its influence resemble in their actions "drunken Europeans."

It seems to act principally on the intellectual or parietal portion of the brain, producing great excitement, followed by congestion. Its action is rapid.

I presented Mr. Spencer with a plant (it is an elegant shrub) which I had obtained, after great trouble, from New Zealand, and hope thereby to have introduced it to the profession. The parson's special friend is "*Lycopodium*" Wilson.

(2) (*Cava*) *Piperaceæ*—*Pip. Methystichum*—from the South Sea Islands. It is prepared by being *chewed* by the young men and women, and spat into a bowl, and is, I believe, used unfermented. It is the drink of the chiefs at their great feasts, and has very exciting and stimulating properties.

It is stomachic and mildly aperient, and more highly esteemed by those habitually accustomed to alcoholic drinks than even *nux vomica*.

(3) *Ailanthus*, from Government Botanical Garden. No experience.

(4) *Quillaia Saponaria*, from the west coast of South America. It is used by the sailors and laborers on the coast for cleansing their woolen clothing, and is considered superior to soap for that purpose.

It contains a powerful alkaloid, which may be seen in pure crystals in the bark, resembling quinine.

It has great therapeutic powers in all affections of the trachea (serous membranes generally). Its action on the lungs is similar to, but more powerful than *squill. marit.* It is also a valuable remedy in squamous diseases of the skin. It does not yield *all* its virtues to alcohol.

(5) *Phytolacca Octandra*, growing in great abundance all around this city, but not indigenous. This is a most valuable plant, used

either internally or externally. It is *specific* in diphtheria*—given in decoction or infusion—applied very assiduously to the fauces as a gargle, and used *hot* and frequently repeated as a poultice to the throat: all stiffness disappears; the membranaceous formation is thrown off, and is not reproduced; perspiration follows; fever subsides; all aching general pains and headache disappear, and the patient eagerly seeks for food.

It is indispensably necessary to sustain the patient in this and *similar* diseases; and this is best affected by a liberal supply of "*Liebig's*" tea, freely acidulated with hydrochloric acid. *Stimulants (alcoholic) rarely do good.*

All affections of the mucous membrane are influenced by this remedy—rheumatisms, fevers, skin diseases, even impotency. It is a polychrest of the purest water.

Diphtheria has given way under *apis*, with hydrochloric acid and honey used freely as a linctus (the acid effectually destroys the membrane); also a liberal supply of Liebig's tea, freely acidulated with hydr. acid. Would the acid be effectual alone?

Last year scarlatina (?)—the eruption was measles-like—with diphtheria bade defiance to *Belladonna*, when the head and throat symptoms were prominent, attended by putrescency; *Lachesis* acted charmingly; but if the chest was affected, *Bryonia* also was indispensable. *Ammonia* disappointed me, even in allopathic doses; and the allopaths were last year, and are this, very unsuccessful! Thank God! I am otherwise.

(6) *Diodon—Bladder-fish—Toady.*

I made a preparation with *alcohol*, and administered it to a patient with "chorea," (1 drop to 120,) every four hours, for three days, without eliciting any symptom. The patient perfectly recovered; but then he had been using *belladonna* before and up to the administration of the *Diodon*. Did not the *bell.* cure? and was not the *Diodon* rendered inert by the alcohol, *its antidote*? The fish forwarded were therefore preserved in glycerine.

These fish are very common all along our coast, in salt water rivers and creeks, but I believe are only found in shoal water (the *Tetraodon* I have obtained only in deep water); they take bait of any kind readily, are very fearless, and will ravenously seize upon other fish nearly as large as themselves.

They are exceedingly poisonous, even in the smallest quantity, at all seasons, and under all circumstances, cooked or otherwise; every particle is deadly poison, whether skin, flesh, entrails or liver. The latter, however, is said to be most poisonous, though I doubt it. I never heard of any one recovering after partaking of them, and death is very speedy.

I knew a lady, her three children, and ayah or nurse, all died after partaking of these fish, which had been properly cleaned and

* Dr. Burt recommends TINCT. PHYTOLACCA DECANDRA in four drop doses, every hour, in severe cases of diphtheria, and that a gargle made with fifty drops to a tumblerful of water should be used frequently (*Dr. Hale's New Remedies*, p. 314 and following).—Ed. Rev.

cooked. They had caught them and dressed them for amusement, on the beach near to their residence.

A poor woman and her three children died from the same cause, and at another time three laboring men.

I have destroyed, when a boy, numerous fowls, cats, dogs, and I think *pigs*,* by giving these fish to them, after I had caused the fish to swell up by rolling them under my foot and then bursting them by throwing a stone on them, when they ruptured with a great report. This is a common amusement with idle boys. Under the process of rolling they foam a good deal at the mouth, and their skins become rough and prickly. The hands and feet of the boys (they are generally shoeless) are frequently chapped and sore. I therefore, fancy the fish is not poisonous when topically applied, even though the surface be denuded of cuticle. It should be noted, the hands and feet under these circumstances would be frequently in *salt* water. I recollect we had a dread of touching our eyes with our hands until they had been well washed.

I hope you will experiment with the *Diodon scientifically*, and would suggest that the fluid in which they are preserved may be experimented with.

Would this be a remedy for *lyssa*? The poison seems to have a similar action to *curare* and snake-poison in general—that is, a total abolishing of the sensitiveness of the nervous system. It is death without lesions; and might not life be preserved by keeping up artificial inspiration? It is only an *anæsthetic*, and artificial inspiration is specific in all anæsthesias.

I almost long for a case of snake-poisoning—would *curare* or *strychnine* antidote? If so, the axiom "*Contraria contrariis*" is true; if not, the reverse.

Fish frequently produce poisonous symptoms "after having been exposed to the moon," they say,—but certainly when not perfectly fresh; and other fish when they *first* appear on our coast. So do

* Pigs.—I have given, some years by-gone, four or five grains of *strychnine* (good French) to a large pig, in an apple, which she ate with impunity. The following day I repeated this dose, without any apparent effect. I am certain the pig ate the apple and *strychnine* on both occasions. I am informed by credible authority that pigs are not, or but triflingly, susceptible to the poison of *strychnine*.

I witnessed the peculiar action of a flock of birds (cockatoos) that had been poisoned by wheat soaked in a solution of *strychnine*. The birds (some of them) when disturbed vaulted into the air to a considerable height (not their natural habit of progressing), and then took somersaults, to the great delight of their companions, who followed screaming after them; then suddenly would some other of the flock be similarly affected, and a repetition of this exciting scene would take place, when suddenly some from their vaulting elevated position would come whirling to the ground dead, and generally on their backs.

A poor Chinaman who cooked and partook of some of these birds was found dead in his hut, and also his two dogs.

It would appear that the toxical effects of the *strychnine* was displayed on these birds by the hyper-excitation of the nervous system, before its fatal effects or total abolition of the nervous power was produced. I have witnessed similar effects in dogs, from a like cause. What the poor Chinaman suffered, Heaven only knows!

shell-fish—oysters, &c. But these cases are easily treated, and I never heard of a fatal case.—WILLIAM SHERWIN.—*British Monthly Hom. Review*.

ERYNGIUM AQUATICUM.

PARTIAL PROVING BY C. H. M'CLELLAND, M. D.

During the winter of 1858 and 1859, while at the Cleveland College, I undertook to prove *Eryngium aquaticum*, with the following results: I took from five to 20 drops daily, for about ten days, stopped, and concluded that the remedy would not take effect on me, when, in course of a week, the following symptoms appeared: [I would here state that I was suspected by professors and students as being under the influence of venereal disease, which caused me to try several substances as antidotes, before the drug had expended its powers. It was a most thorough proving, and if others had taken interest in it, a full report might have been secured; but I have only notes of part of the symptoms, as follows:]

EYES.—Purulent inflammation of left eye, congested, red, swollen slightly, tender to pressure, constant aching dull pain, relieved by heat, followed by profuse discharge of purulent fluid, sticky, like gum arabic water, sticking lids together, flowing on cheek from all parts of eyelid. Lasted 48 hours, leaving conjunctiva granulated and rough.

THROAT.—Intense redness and congestion of mucous membrane and throat as far as could be seen, slight swelling, without pain or bad feeling, with profuse secretion of thick, whitish mucus, giving the throat an ulcerated appearance. Inflammation of the eustachian tube, also left ear swollen in and out, tender to pressure, constant aching pain, bleeding readily, with discharge of thick, white and bloody pus, foul smelling, lasted several days.

Nose.—Profuse discharge of thick, yellow mucus from nose, lasting several days.

CHEST.—Oppression of chest, feeling of fullness, inability to take full breath, with desire to do so, no cough, lungs seem to be solidified.

TONGUE greyish color with ragged appearance, constant hacking up of mucus.

GENERATIVE ORGANS.—Sexual desire suppressed, then excited with lewd dreams and pollutions, discharge of prostatic fluid from slight causes.

URINE clear at first, usual quantity, then deep yellow, profuse, no froth or sediment.

PULSE increased about ten beats, but soft and weak.

GENERAL SYMPTOMS.—Feeling of great debility, lower extremities languid and heavy, with profuse perspiration on walking, *fainting fits*, dare not rise suddenly, step down, or turn my head quick or I would fall into a swoon, and once my room mate had trouble to get me brought to my senses. Left os-calcis and patella tender, sore and painful on motion. Continued singing and ringing with cracking sound in left ear.

I would state that these symptoms only extended over a few days, my condition being I such was glad to get rid of them, and I give them just as I wrote them five years ago, and send you this brief report, many physicians thinking that it may be of use to the profession. My impression is that the Eryngium is suitable for chronic diseases, especially those of syphilitic type. I have found the Eryngium useful in most symptoms, such as I have described, especially the fainting fits and ophthalmia.

POLYGONUM HYDROPIPER. ✓

PARTIAL PROVING BY DR. C. C. CAMERON.

Age 25, nervous-bilious temperament. Not addicted to the use of tobacco or intoxicating liquors in any form.

May 18th, 1865, 2.30 P. M., took five drops. Constriction of the larynx; deep, heavy pain in the umbilical region, relieved by pressure; headache left frontal region; throbbing, shooting pain in the left wrist, extending to the tip of the middle finger.

May 19th, 10 A. M., took 10 drops; 12 A. M., 10 drops; 1.30 P. M., 15 drops. Quickly followed by a sensation of heat in the stomach, borborygmus and emission of flatus per anum; dry, tickling sensation in the throat. 2.15 P. M., copious liquid stool, followed by a smarting sensation of the anus (my bowels had moved as usual at 8 A. M., and are generally very regular). 4 P. M., 25 drops, borborygmus. 5 P. M., 50 drops, fulness of the head.

May 20th, 9 A. M., 100 drops, followed immediately by burning pain in the stomach—eructations—sticking pain in the right hypochondrium—great pain in the head, shifting from the frontal to the occipital region; shooting pains in the left arm, from the elbow to the tips of the fingers; pain in the left knee, with feeling of great weakness; severe frontal headache.

May 21st. Shooting pains in the arms, back and legs ; also acute burning pain in the epigastric and umbilical regions ; tongue coated yellow ; loss of appetite.

Constipated since 19th inst., 2.15 P. M.

My tincture gave out with my 100 drop dose, therefore was compelled to relinquish my proving, but think that if it had been continued I should have obtained some valuable symptoms.

Surgery.

ADDITIONAL NOTES ON CANCER.

BY C. H. MARSTON, M. D.

The notice which Dr. Hale of America has taken in his "New Remedies" of the paper on "Cancer," which appeared in No. 86 of this Journal, affords a favorable opportunity for carrying out a design which had been proposed by the late Dr. MacLimont and myself, of extending our report of the cases alluded to in that paper.

I cannot proceed without paying a tribute of affection to the memory of my beloved and deeply-mourned-for friend, snatched away in the prime of life and in the midst of professional success from an ever increasing circle of most ardently attached friends and patients who live to lament the, to them, irreparable loss of a true-hearted sympathising counsellor and highly accomplished physician, in whom they placed an unbounded confidence, and whom to know was to love and esteem.

In the exercise of that frequent intercourse which we were in the habit of enjoying the one with the other at the bedside of our patients, he contracted the last, fatal illness (scarlatina), which a few days subsequently terminated his valuable life, a life which, next, perhaps, to his bereaved and sorrowing partner, was to me most dear. I will not, cannot, say how much I loved and prized him. To undertake this work alone, in which he should have joined me, is afflictive, but—*resurget*.

I see that Dr. Hale alludes to Professor Wood's statement, that *the notion of the efficacy of Hydrastis in cancer, originated in a report which reached the late Professor Barton, that it was used in cases of this complaint by the Cherokees* ; though strangely enough he afterwards says that "we have looked through the various works published in this country (America), in which this plant has been noticed, but do not recollect that it is once mentioned as having been used in cancerous affections." Medicines have sometimes a strange sort of introduction, especially in America. I once heard of a grad-

nate in medicine, who, having failed in the exercise of his profession, devoted himself to keeping a general store, until, falling in with a blacksmith, who *for a consideration*, divulged to him some wonderful secret (probably learned from the North American Indians), he was at once seized with the bright idea of becoming a public benefactor, and returned under brighter auspices to his forsaken calling. More than one medicine may have been imported in this way from the Indian tribes (to whom, indeed, Dr. Fell attributes his first knowledge of *Sanguinaria*), and by some such course it is not impossible that the fame of *Hydrastis* may have reached Professor Barton, Professor Wood, and ultimately even doctors in England, without having received much notice from the American medical press.

Be this as it may, (and it is a matter of no importance,) Dr. Hale appears to have mistaken the character of our paper, which was to give the result of our experience in the new mode of treating cancer, and in which the consideration of *Hydrastis* formed only a single element.

The principle upon which our paper proceeded was that the treatment of cancer, to be successful, must be in a great number of cases, both *surgical* and *medical*; that no medical means could, in the majority of instances, be depended upon, while the tumour itself existed as a secondary source of blood-poisoning, and that, therefore, with such exceptions as we pointed out, it was usually necessary to remove the tumour by surgical measures, in addition to the administration of such remedies as might be supposed to exercise more direct action upon the constitutional disease.

The removal of the tumour might be affected by the knife, or by enucleation through the application of caustics; neither of which affects the question of *medical* treatment, and, therefore, in no wise the question of homœopathy. We gave our reasons for objecting to the use of the knife, and for preferring the use of caustics, especially as used in the method introduced by Dr. Fell.*

Dr. Hale advises that we should use *Hydrastis* alone in the incisions, but he does not tell us whether he proposes to make these incisions through *living* tissues, and to fill up the bleeding wounds with *Hydrastis*, nor whether he conceives that this proceeding would at all conduce to the end we contemplate, viz., the enucleation of the

* It had always been a source of pleasure and regret to Dr. McLimont and myself, that a fuller notice of Dr. Fell's treatment did not appear in our paper. This was entirely the result of accident, and happened thus:—We were residing twenty miles apart. At his request I wrote the section on caustics, though the surgical portion, with this exception, was wholly his work. I added to what appears in the paper, the history of Dr. Fell's treatment, referring the reader for further particulars to the 'Middlesex Hospital Reports,' and forwarded the whole by post to Dr. McLimont. On the following morning I received the concluding portion of his manuscript (crossing mine in the post), in which he entered upon his early acquaintance with Dr. Fell, and repeated what I had written the previous evening. I crossed out that portion, considering it a repetition of what had been already written. He for the same reason erased this portion from my manuscript, and the total unintentional omission of what we had both desired should appear, was only discovered when the Journal was in our hands. We did not then, however, consider it sufficiently important to put the printer to the trouble of altering it for the subsequent reprint.

tumour; if he recommends this plan, let him make his first and last attempt. Gentlemen who propose absurdities, should be backward to charge others with absurdity. It is, of course, obvious to all surgeons that the chloride of zinc is the *sole* agent upon which the successful enucleation of the tumour depends, that this takes, as it were, the place of the knife in a cutting operation, and that any other ingredient added to the caustic is only of use to modify its action, or to form a vehicle for its application. We had, indeed, long ceased to regard the addition of the Hydrastis as being of any other service than to form a convenient diluent, which, from the glutinous nature it assumes on boiling, it certainly does. The paste which I am now in the habit of using, consists simply of finely-powdered Hydrastis boiled down to a proper consistence, which is maintained more uniformly than in a paste made with flour, which, with this exception, answers equally well. To each ounce of paste, half an ounce or more of the chloride is added, according to the requirements of the case. The assertion that it mitigates (except as a diluent) the pain caused by the chloride, we have always considered as so much *bosh*, and have never seen any reason whatever for supposing that the paste used by Dr. Fell causes any more pain than that made with Hydrastis. The pain varies exceedingly in different individuals, some scarcely complaining, while others suffer severely, and it is very difficult to explain this difference. Much, however, depends upon the position of the part, the nature of the tissue acted upon, the strength of the paste, and the care which is exercised in making the incisions.

In writing our former paper we very much felt that the comparatively short experience which we had had, rendered the relation of that experience of less value than it would have possessed had we suffered a longer time to elapse.

On the other hand, we had already been charged with the use of secret remedies, and we knew of no way in which we could deliver ourselves from such an accusation (involving professional misconduct which we should have resented in others) than by publication. We, moreover, considered that the new method had already been for some time before the profession, and that, therefore, our experience, though crude, could be taken for just as much as it was worth; while its presentation in such a form would enable our colleagues readily to test it for themselves, and so to enlarge the field of observation far beyond what could be afforded by two practitioners in extensive practice, who had no desire to make the treatment of cancer a *specialite*, nor to enroll themselves in the *honorable* (?) band of so-called cancer curers. For the same reasons I purposely refrain from reporting in detail any new cases which have fallen under our treatment, and, excepting it may be incidentally, confine myself to a notice of the cases already reported.

CASE I.—This case (as already fully explained) was never wholly under our care,* and though sufficiently so to warrant our using it in

* I have the authority of the patient for contradicting the statements made respecting this case in a recent pamphlet. I quite feel that even this slight allusion to such a production demands an apology from me.

illustration of the enucleative treatment, not sufficiently so to throw its responsibility upon ourselves. This patient still remains free from any evidence of cancerous disease, but for some time she was troubled by the formation of scabs and scales in the neighborhood of the cicatrix, which left behind very troublesome ulcers; to this we alluded in our former paper, and the trouble continued for some time after the publication of that article; it is now, however, removed. From very extensive injury done to the greater pectoral muscle, the use of the right arm has been most seriously impaired and will never, probably, be restored. She has from the termination of the treatment suffered, and still continues to suffer, much from severe burning sensations in the infra-mammary region, in which a good deal of puffy swelling still exists. On the whole, we should be very much indisposed to regard this as a *model* case. It is, however, no small thing that the patient presents, hitherto, no appearance whatever of any return of the disease.

CASE II has not again come under our notice, though I have no doubt that she would have put in an appearance had anything occurred which would have called for our assistance.

CASE III remains in every respect in perfect health. This, considering the advanced age of the patient (now nearly 75 years), is a most interesting case. She reported herself to me lately as having never been better in her life.

CASE IV requires especial notice, and I would refer the reader to the former report of the case for its history, from which he will find that at the time of writing she was still under treatment. Some additional notes are necessary, however, from the circumstances that, fearing we should not undertake her case, she abstained from divulging *fully* all the symptoms from which she had previously suffered and which were chiefly connected with the uterine system; she, indeed, told us that the menstrual periods had been frequently very profuse, but finding on digital examination the os and cervix uteri in a healthy state, and considering her age (45) we attributed this to the approach of the climacteric term. She did not tell us, however, how severe these hæmorrhages had been, nor that only a few weeks before consulting us, her medical attendant had given up all hope of saving her life; nor did she inform us that there had existed at various intervals a purulent and offensive leucorrhœa. Indeed, her fears were well grounded, for, indisposed as we were, with the knowledge which we possessed already, to enucleate the breasts, it is most certain that an acquaintance with these facts would have converted that indisposition into an actual refusal. However, during the first course of treatment none of these symptoms once occurred to excite any apprehension, the menses never appeared, and, as we previously observed, during the time she rapidly improved in health and daily gained strength. During the last period of treatment, however, we had greater difficulties with which to contend—true, the local treatment was, if possible, even more favorable than on the first occasion, but alarming uterine hæmorrhage occurred several times, making large demands upon her constitutional strength, and severe pain of a uterine character was

very frequent; there was also a recurrence of the foetid, purulent leucorrhœa, which excited our gravest apprehensions and made a more careful examination necessary. The vaginal portion of the uterus was still found to be perfectly healthy, but the sound discovered great enlargement of the cavity; while being tilted by its means towards the abdominal walls, palpation disclosed a greatly indurated condition. We diagnosed either fibrous tumour or cancer of the fundus, a question which indeed remains still undecided; although, perhaps, but for the previous existence of malignant disease in other parts, and for the peculiar character of the discharge, we should have settled the point in favor of non-malignant tumour. However, under the use of appropriate remedies the symptoms have diminished rather than increased, the enlargement of the organ has become less, the pain, hæmorrhage, and discharge less frequent and much smaller in amount. During this time, however, the lachrymal sac became again inflamed and the duct completely closed, and seeing how skillfully and successfully she had been previously treated for this affection by the eminent London surgeon under whose care she had been, we advised her, upon leaving us, to put herself again into his hands. His testimony to the remarkable change which had occurred in her for the better, and to the result which had followed the treatment we had adopted, was as flattering to us as it was honorable to himself. The great fear is lest there may be some malignant internal disease which had existed previously (even for years) to her first consulting us, and which, of course, is beyond the reach of any local treatment, or at least of any which I should be inclined to adopt or advise. The condition of the lachrymal sac also causes me much concern; though improved under late treatment, disease still exists, and although there is no present evidence of malignancy, fears founded upon the history of the patient cannot but arise. Nevertheless, it is now two years since she came under our care, and she assures me that during that time she has been in a far better state of health than for many years previously, the breasts and neighboring parts remaining perfectly well.

CASE V left the North Wilts Dispensary shortly after the publication of our paper very much improved, and has not since been heard of.

CASE VI is not so successful an affair. It is necessary, however, to refer to its history. The rapid progress of the disease in the short space of four months sufficiently evinced its extreme malignancy, and threatened a fatal issue in a very short time. About six months from the close of the treatment there was observed a small tumour deeply seated in the axilla, lying upon the walls of the chest and beneath the pectoral muscles. In such a situation re-enucleation was out of the question, and all that we could do was to endeavor by internal remedies to control its progress. The medicines which have been used are *Hydrastis*, 2nd dilution, *Chloride of Zinc*, 2nd dilution, and the 3rd trituration of *Iodide of Arsenic*. The increase of the tumour has been tardy, very little pain has been experienced and the general health of the patient is very good. Unsuccessful as this case certainly has been so far as regards *cure*, it cannot be regarded as unsuccessful so far as

regards *relief*. The condition of the patient at her first appearance was such that I am assured no surgeon, however fond of the knife, would have attempted its use, and all that remained for her, to all human appearance, was a few weeks of intense suffering to terminate in an agonizing death. Two years of ease and comfort have already, whatever the end may be, been added to her life.

If I were asked what case I would like to take as an evidence of what may be done by this treatment, I would certainly take that of J. M. (CASE VII). For eighteen months she has returned to her duties of a gate keeper, and remains perfectly well. As described in the history of her case, we only adopted the treatment as giving her a remote chance, but in no case, so far as twenty months can warrant such a statement, could there be the appearance of a more perfect cure.

CASE VIII likewise remains in perfect health.

Of CASE IX I am not in a condition to give any report. I never saw this patient, and have not, since the record appeared, had any account of her from my late colleague; had he not been so hastily torn from us, he would have been able himself to have stated how it terminated.

This day month (I write on February 25) we were conversing on Case X. The patient has spent two years and a half in comparative health and comfort. Small fungoid growths have occasionally sprung up, but by the application of a little *dilute nitric acid*, which she has been able to apply herself, they have been again destroyed, and the part has cicatrised afresh. To compare the condition of this patient when admitted in 1862 into the Bath Homœopathic Hospital with the report she gave of herself, in writing to Dr. McLimont only a few days before his death, was a sufficient recompense for all the pains he took in her case, and for all the obloquy cast upon him for admitting it into the hospital; while it might cause a blush of shame in those who would have turned her adrift to suffer and to die.

On the whole, then, I think that it will appear that the continued history of these cases is satisfactory, and that it justifies the course we adopted in publishing them, and in pressing a trial of the treatment upon those of our colleagues into whose hands suitable cases may fall. I could not *now* say that we have had no unsuccessful cases. I could not, indeed, say that there has been discovered a *cure* for cancer. In two or three cases the disease has returned in the cicatrix very shortly after its removal, and with perhaps a greater degree of malignancy than characterised its first appearance, and this failure has not occurred only in our hands, but the worst cases of the kind which have come under our observation (one of whom lately died as Dr. McLimont's patient) had been treated by one who makes this disease specialite.

So far as the question of enucleation is concerned, we (if it be allowed me now to write in the plural) should endorse the opinion of the Middlesex Hospital surgeons, that the same principles should guide us in selecting our cases as guide the best surgeons in using the knife; with this important provision, that there are cases, which

from their situation, &c., would be precluded from a cutting operation which can be readily reached by enucleation; the most important considerations are those which are involved in cases where there is much induration extending into the axilla, where the parts around are œdematous,* or where there is reason to suspect any internal disease.

One great advantage of this treatment, however, consists in its applicability as a palliative in certain incurable cases. A lady from South Wales consulted me last Spring, who had submitted within a few months to two cutting operations, the disease having returned almost as soon as the first wound had healed. A short respite was obtained after the second operation, but only a short one, and her surgeons felt that no more could be done. When she came under my care, an oval space, measuring seven inches in its longest diameter, was found to be occupied with two highly raised bosses of cancerous tissue ulcerated throughout their whole extent, and separated for nearly their whole length by a chasm in some parts more than two inches deep, reaching very closely to the ribs; the constant and profuse offensive discharge which was flowing from this mass of disease, rendered the patient a nuisance to herself and to all who came near her, while frequent outbursts of hæmorrhage caused her much alarm. I should have sent her home at once but for the recommendation of my lost friend, who advised to enucleate as much as possible, and setting to work with a good heart, I have had the satisfaction to send her home in a good state of general health, free from pain and discharge, and with a wound no larger than a sixpenny piece, which was promising to heal. A cancerous tumour existed in the upper part of the opposite breast, which, while under the treatment, greatly diminished. The best evidence of the benefit of the treatment is, perhaps, found in the fact that her own medical man (an allopathic surgeon of great repute) sent me a patient suffering from cancer, soon after her return.

The question which really arises is not so much, Can we by this means cure the disease? but can anything at all be done in this dreadful malady? If so, can anything better be done? Can anything so good be done? Some cases are cured by the knife, but how very few. With one exception, the cases in which we performed enucleation two years ago or nearly so, remain well. If it be objected that this method, as was stated in No. 87 of this Journal, "has been hitherto confined to foreign adventurers," I only reply that if this is true and if there is any worth in the treatment, the way to take it out of the hands of such, is to treat them ourselves. We all have such patients to deal with, the treatment is one which all skillful practitioners can practice for themselves, and therefore, it is our own fault if we suffer patients, who come to us for aid, to fall into the hands of such persons. My object is not so much to commend this especial mode of treatment, as to give my professional brethren an opportunity of judging for themselves, and to urge upon them that they should do their *best*, whatever that *best* may be, for the relief of a malady which, in

* At the earnest solicitation of a patient in whom this condition existed, I consented to make an attempt, and to give her a chance. The disease, however, outran all efforts to overtake it, and the patient died with the wound unhealed.

the present state of our knowledge, our *very best* still leaves one of the most terrible which flesh is heir to.

In a recent paper read by Dr. Bayes before the British Homœopathic Society, he observes that the value of Hydrastis appears to be evidenced, especially in those cases in which the glands only are affected. Our own experience, if I except Case V (in which the diseased condition of the uterus was much bettered), bears out this observation, and I am inclined to agree with him that it is rather through a specific action which it exerts upon the glandular structures than through any specific action upon cancer as such, that the favorable results which follow its use depend.—*British Journal of Homœopathy*, April, 1865.

Miscellany.

ARE WE PROGRESSING?

Non progredi—regredi est.

BY J. F. MERRITT, M. D.

In the onward march of science, there is left in her track the debris of exploded theories, of false systems demolished, the rubbish of centuries, from which a few golden grains have been winnowed. To all this we are wont to point with pride, as evidence of progress in the search for truth, and on the whole not without reason.

Yet with all our boasted attainments, there is enough of the errors of the past still clinging to us to make our demeanor modest, and to shaken an over-weening confidence in present acquirements. We are reminded of this when we reflect that in some respects the progress of the medical world, has been in a circle. Thus, the humoral pathology had its day, passed away to be held in derision by the Solidists, who in turn shaped the opinions of their times; and now again under the guidance of microscopic research, we come back upon the platform of humoral pathology again.

But our prejudices in favor of the obsolete are never so patent as when we examine our nosology. Here we use terms, which in the present state of our knowledge of Pathology, either mean nothing, mean what does not exist, or mean so much as to be vague and indefinite. Now we hold that a nosological term, to be of value, should convey as concisely as possible, the existing, morbid condition. For that condition, looking through and beyond the symptoms, either in the structural changes that may have taken place as the result of morbid forces, or in those morbid forces themselves, where we reach the domain of vital forces, one of the legs of the tripod upon which our system of therapeutics stands. It was reserved for Homœopathy to open the outer door to the arcana of these forces, and thus get

view of the mode by which pathological changes are affected, and the laws governing them. Much still remains in doubt. A vast unexplored territory lies before us, inviting some Livingston in medicine to the task and the reward of discovery. For the present, and in the majority of instances, we must take the pathological condition as being practically the ultimatum, in all cases regarding this condition as our interpreter of the morbid forces operating behind. Pathology is, then, of use to Homœopathic physicians, much as has been said to the contrary, notwithstanding.

Our Nosology must be based upon our Pathology, the latter being or representing the condition to which the former must give a name. In this respect, the terms employed by our ancestors were correct enough, because by them was expressed all that was then known of the condition of disease (Pathology). But now, when many of the hitherto dark places have been lighted up by the torch of modern discovery, it becomes us to make our Nosology correspond; in other words, to make it express just what we know of the morbid condition. But is it so? How many of the terms employed by members of the Profession, are objectionable, on grounds already indicated? Take Bilious Colic, that scape goat which has borne away to oblivion, the errors and the ignorance, the doubts and the fears of Doctors, a term which it is true our recent works on Nosology and Practice have very commendably rejected, but which clings as persistently to the tongue of many of our fraternity, as does the celtic brogue to the tongue of our adopted Emerald Islander. What is Bilious Colic? Not what are the symptoms that indicate it, but what is the thing? What is the exact condition to which we may legitimately affix the term Bilious Colic? Evidently enough the term is vague, it having been employed to designate (?) what is now known to embrace several different, and *sometimes* undistinguishable morbid conditions. 1. Intussusception. 2. The passage of calculi through the biliary ducts. 3. Intestinal concretions. 4. Spasmodic contraction of the bowel. 5. Strangulation of the bowel by fibrinous bands, the result of inflammation. 6. Paralysis of the nerves supplying the muscular coat of the bowel, producing obstruction by suspending peristaltic action. 7. The passage of renal calculi through the ureters. Upon homœopathic practitioners, as a class, it has been charged that they reject pathology as a guide in the selection of remedies, that they insist upon the symptoms exclusively as furnishing the indications of cure, and therefore, are not the disciples of Hahnemann; that it makes no sort of difference whether the morbid symptoms in a given case depend, for instance, upon a foreign substance within the tissues of the organism, or whether those symptoms are the natural signs of idiopathic disease. If it be conceded that we follow the guidance of this erratic mentor—symptomatology, that it is the groundwork of our system—we cannot escape the conclusion that a man may be a practitioner of Homœopathy, and yet be ignorant of Pathology, or even of the tissues and organs of the human body. The inference is pressed still further—and to our discredit if it be legitimate—that the inevitable tendency of the new system is to obliterate all lines of demarcation between

different diseases; that this must grow out of the very principle adopted by us as the guiding spirit in the selection of the means of cure. But no. Its claims to pre-eminence are rested mainly upon the principle of applying drug action to diseased vital forces, rather than to their pathological products. Such we believe to be the distinctive fundamental feature of homœopathy, the homœopathic relations of the drug to the disease, and the matter of the dose being but corollaries of the proposition.

Let it be understood that our system recognizes no utility in a knowledge of the remote causes of disease; none in a study of the structural changes produced in their course; that whether we discriminate between diseases or not, we shall be equally successful in treatment. Let this be published to the world as a part of our creed, and we must be content to rest under the imputation of being humbugs and pretenders, precisely the position assigned us by our worst enemies of the dominant school.

THE GREAT MORAL CENSOR.

In the *Lancet* of March 18th appears the following enigmatic sentence:—

DISPENSARY REPORTS.

“THOMAS.—The position of a homœopath with a practitioner of legitimate medicine may be socially good, whilst all communication with him professionally should be repudiated. If the person is of good character, it would not be wise to refuse him admission to the club.”

In the name of all that is humorous, what does our old friend mean? Does he really intend to say that the “orthodox” Thomas may shake hands with a homœopath? that he may meet in the same room, sit at the same table, read the same papers, and that it would be unwise to refuse him admission to the same club on an equality with “Thomas the legitimate?”

The *Lancet*'s language is often obscure and oracular, but it was never more so than in the passage before us. “The position of a homœopath with a practitioner of legitimate medicine may be socially good.” Does he mean relatively? Has he really discovered that physicians practicing homœopathy are, after all, honest men, and that in spite of all the objurgations of the *Lancet* they are still able to hold their heads above the social stream?

We opine that the *Lancet* and the “inane Thomas” begin to feel how utterly despicable their “little game” against homœopathy appears, to men capable of appreciating that which is noble and gentlemanly in public opponents; they feel the “conscious blush of shame” at the “position, socially, morally, and medically,” *as bad as can be*, into which they have, very ridiculously, been led by the great “BRITISH MEDICAL ASS,” which, bred in Worcester some years gone by, has put on the lion's-skin of MEDICAL TERRORISM, and gone bray-

ing about the country ever since against *medical liberty*, and especially against the *medical reform* proposed by *homœopathy*.—(*British Monthly Hom. Review*, May.

PAIN IN THE LOINS.—Many have difficulty in determining the diagnostic value of pain in the lumbar region. Dr. Okie says, *If the pain be rheumatic* it will be increased by pressure, and by the slightest action of the muscles affected. *If from the liver* the pain will shoot upward along the splanchnic nerves to the scapulæ. *If from the duodenum*, three or four hours after the meal, the pain will be aggravated, shooting through toward the right side of the abdomen, and remaining till the food has part the jejunum. *If from the kidneys*, the pain will shoot downward along the course of the spermatic nerves, and there will be more or less irritation of the bladder. *If from the uterus*, the pain will be of a neuralgic character, and more or less paroxysmal, if the disease is functional; but will be constant and severe, passing downward along the crural nerve, if from structural disease. *If from the colon*, there will be constipation, and inflation in the course of the bowel, with soreness on pressure.—*Eclectic Medical Journal*.

THE KENOSHA WATER CURE, a Homœopathic and Hygienic Institute, presents many inducements to invalids. It is situated on Lake Michigan, about midway between Chicago and Milwaukee. The climate of this part of Wisconsin is cooler in Summer than Minnesota, and warmer in Winter. The proprietor has secured the services of Prof. Gatchell, who possesses great skill in the treatment of chronic maladies. The Institute being well conducted, the physician skilful and attentive, and the climate salubrious, we think this Institution can be safely recommended to patients.

Personal.

Dr. HENRY PEARCE returns to Green Bay upon the urgent request of his former patrons.

Dr. F. G. HUNT has removed to Milwaukee and will practice with Dr. Leuthstrom there.

THE MICHIGAN HOMŒOPATHIC INSTITUTE will hold its annual meeting in the basement room of the Central Methodist Episcopal Church, at Detroit, on Friday, the thirteenth of June, 1865, at 10 A. M.

Dr. E. H. DRAKE will deliver the address.

For account of Committees expected to report, see page 160 of this number.

ERRATA.—On page 158, line 21, read 13th of June instead of 18th.

Lectures.

ANNUAL ADDRESS

Delivered before the Michigan Homœopathic Institute, by E. H. Drake, M. D., of Detroit, June 13, 1865. Published by request of the Society.

Having been appointed at the last meeting of the Institute, to address its members on the present occasion, I reluctantly proceed to perform the allotted task, for task it really is, being conscious, as I am, of my inability to instruct, or even to interest. It is somewhat difficult to withdraw the mind from the daily rounds of practice, and have it relieved from the task of analysing and combining symptoms, deducing from them a true diagnosis, selecting remedies and determining prognosis. Besides the different subjects pertaining to the science of medicine have been so often and ably discussed, and subjected to such exhaustive research, that it is difficult for one engaged in the active and onerous duties of practice, to elicit any new fact.

Our literature is so lumbered with crude statements, hasty conclusions and speculative conjectures, that we are compelled to discriminate closely, sift carefully, and test in the crucible of experience, before we are able to say whether so much rubbish contains even a single diamond of truth. To learn what is written is not so much of a task as to separate the reliable from the unreliable, the useful from the useless. This is especially the case with our *Materia Medica*. Many prolific writers seem to have quite ignored the method adopted by the founder of homœopathy, and his early disciples,—of carefully proving a remedy before prescribing it in disease, and to have largely fallen into the old practice of giving clinical experience, with crude and often massive doses, combined with theoretical and speculative conjectures, as the basis of therapeutical use. One writer cures diphtheria in its worst forms, and in seventy successive cases, readily and certainly, with a remedy that others cannot, after the most careful trials, obtain any benefit from whatever. Another, high in the pro-

fession, cures the same disease invariably with the two hundredth of remedies, that seem to have little or no pathogenetic relation to the diseased action. Another, whose medical life from the first day he was a student, scarce numbers two dozen months, administers a *new* remedy in some dangerous case of disease, the diagnosis of which must be taken without question, and forthwith an article is prepared for a Journal, and the author has set his first mile stone on the high road to the temple of fame. These confident statements and empirical speculations, often times so bewilder the mind and impair its confidence as to make it exceedingly difficult to determine how much and what is true and reliable, and what and how much is to be thrown aside as rubbish, which, having served the purpose of giving the writer the gratification of seeing his name in print, is of no further use.

I would not be thought as wishing to discourage the giving our experience, or making others acquainted with any important *facts* we may obtain by careful study, investigation and practice; but let us be well satisfied they are facts. Instead of generalizing, let us be particular. Thus, instead of saying we gave a certain remedy in a certain disease, let us carefully detail the symptoms, so that others can judge somewhat of the correctness of our diagnosis; and if correct, so that we can note the slightest shades of difference between it and some similar case, in which we may feel disposed to prescribe the vaunted medicament; for often the *success* of our prescription depends upon some *slight* difference in symptoms, or in their combination or succession. Instead of saying this or that medicine was given, we ought to give the potency, and whether decimal or centesimal. There is quite a difference between giving the 1st decimal trituration in one or two grain doses, or the 1st decimal dilution in two or three drop doses, and in giving the same remedies in the 3d, 6th or 30th potency.

We cannot be *too* particular and precise in detailing *facts*, for *always* their *value* depends upon their intelligibility and accuracy. Clinical experience is of much importance, but it must come to us in such a manner that we can obtain a distinct idea of the *case* in all its bearings; that we can mentally be present, and take cognisance of everything relating to it. Then *only* are we able to appreciate the instruction intended to be imparted, and derive benefit from it in the cure of disease. It is this we all are striving for and working for. The safest, surest and quickest method of curing disease, is the great desideratum of all physicians. This should be the *end* aimed at in all our studies, in all our investigations. All things else with the consi-

entious are made subservient to this one. The cure of disease, and consequent mitigation of human suffering, is alone sufficient to stamp *excelsior* on our banner, and inspire us with somewhat of the spirit of Him who healed the sick, cleansed the leper and made the lame to walk.

But in order to do this successfully and certainly, there are *pre-requisites* absolutely essential, without which we shall ever be groping in the mists of doubt and hesitation. First and foremost, is a competent knowledge of anatomy. This is the foundation on which we must *rear* our superstructure, if we expect it to withstand the storms and tempests of daily practice. As well expect to safely glide over old ocean's bosom, without a knowledge of his hidden rocks, his shoals and quicksands.

A *sine qua non*, also, is a knowledge of healthy action, or of those active functional relations, the harmonious combination of which constitutes health. Unless we fully understand healthy action, we most assuredly shall not be able to detect diseased.

One great difficulty the profession has to contend with is, a disposition to laxity in these groundworks of a medical education. Students *hurry* on to assume the practical and responsible duties of the physician, before they have been fairly students. Young men seem anxious to enter the inner court of the temple, without passing through the outer gate. I have been led to these reflections by the fact that young men have been encouraged to enter upon practice before they had completed one third of the allotted time of the student; and candidates have presented themselves for admission into this Institute, who could not tell which side of the heart circulated red blood, or even how many cavities the heart contains. Students are allowed to obtain diplomas from our colleges, short of a full compliance with their prescribed rules, and if I am correctly informed, in some instances, without being present at all during the course at which they graduate. This is all wrong, and gross injustice to those who earnestly strive to acquire a competent knowledge of the profession by complying with all the requirements. If we wish to elevate our profession, we cannot exercise too much care in guarding its walls.

As has been stated, the *end* to be *attained* is the cure of disease, in the safest and speediest manner possible. Is it not, then, necessary, that we should have a knowledge of diseased action? That we shall be able to detect those changes in function, and alterations in structure, which if not the disease itself, are its legitimate offspring, and betray its presence? That we shall be able to place the finger, as it

were, on the diseased spot, and say positively what tissue is involved, how affected, and to what extent? This knowledge comes within the domain of pathology, and yet, articles are written to prove this is not *necessary* to the practitioner, and is not, and should not be made, the basis of therapeutics; or determine the selection of the appropriate remedy. With all due deference to those who entertain such views, I believe the assumption is a fallacy, and if followed, will lead us into difficulties interminable, and from which it will be quite impossible for us to extricate ourselves without loss of honor and reputation. By pathology, in its broadest sense, is understood all that we can learn of disease, including its etiology, semiology, diagnosis and prognosis. The first of these is often important, and cannot be neglected without detriment. But often, and in the large majority of cases, the cause is occult, deeply hidden in the world of causes, and all our speculations concerning it will be futile. What do we know of the cause of typhoid fever, rubeola or cholera, or any other of the many diseases that often sweep over the world with such fearful fatality? Nothing, absolutely nothing. The truth is, morbid forces, like remedial agents, are often imponderable. But none the less real, none the less potent; and if we doubt the power of the *one*, we may equally so that of the other. In cases of injury or exposure to cold, or when some violation of the laws of health is obvious, the cause is palpable. Even then it is not easy to say why one should have Pneumonia, another Tonsilitis, another Pleuritis, and so on. We may ascribe it to predisposition; but here we come *at least* upon the borders of the unknown. We have to deal with *effects* while in this world of *effects*, and it is laudable to trace these back to causes as far as is practicable.

Disease in its essence is not a unit, but multiform; and also dynamic. To combat it successfully, we must resort to dynamic and diverse remedies. Of one thing we may be certain, it had its origin in violated law, and having once been given birth, is propagated by the same causes in which it first originated. Although we may not be able to always say satisfactorily to ourselves or intelligently to others what disease is in its essence, yet there are always sufficient disturbances in the organism, to make us aware of its presence, to warn us of danger, and to enable us to determine its character. While I would not underrate symptoms, *well* knowing that it is only through them we can obtain any idea of diseased action, yet I am well aware that they are often most deceptive, and will lead us into errors deep and difficult, unless we are prepared to understand them, and give them their true import. They can *only* be of importance as they in

form us of the presence of disease, its locality, its nature, its extent, and the changes in structure that have been, and *are* taking place. The same symptom may be, and often is, the result of entirely different pathological states, and requires very different remedies for its removal. Thus, an acute, cutting pain in the side, may be produced by pleuritic inflammation, or nervous irritation. Pain in the knee may be caused by inflammatory or reflected action. Nausea and vomiting may be the result of renal, uterine, hepatic, gastric or cerebral disease. It is only when we take the symptoms as a whole, and from them deduce the actual pathological state, that they become of that great importance in the cure of disease, which they are destined to occupy. A pneumonia, or any other given case of disease, may assume very *slight* or very *great* shades of difference, in consequence of diversity of cause, temperament and other circumstances, some of which may be adventitious, and others dynamic; some palpable, and others occult. It is *these shades* of difference that claim our careful attention, and set aside the objection often urged, that we treat the name and not the disease, when we prescribe pathologically. If we well understand the symptoms evolved, and not only the nature of the morbid action by which they are produced, but the alterations in function, and changes of structure, which have been and are taking place, we shall be able to bring our treatment to bear upon the disease, in such manner, and with such certainty, as will afford us a cure where a cure is possible.

Disease is not only multiform and dynamic, but specific, observing the law, that like causes produce like effects. It expends its force in certain directions. In consequence of this specific, and we may say, eclectic character, a certain combination of symptoms has received a definite name, to express its individuality; and while we may become familiar with each *genus*, we can only become well acquainted with each *species* by individual examination. While we recognize it as a *member* of the same family, we must still regard it as a distinct individual. What has been said of pneumonia, is equally true of other diseases; and what is true of disease, is, and must be true of medicinal agents; otherwise there is not that intimate *similarity* between the *effects* of disease, and the action of such agents on the organism, as is necessary to establish the truth of the universal applicability of *similia similibus*, as a law of cure. A medicinal disease is known by its symptoms, and we determine whether it is of this or that family, and also its individuality, by the peculiar character and combination which they assume. Thus, we may find the

brain principally involved, and we shall be able to detect, with tolerable certainty, which of the narcotic poisons has been administered, and is thus presented and mirrored in the existing state. We are able to distinguish the opium disease from the belladonna, and either from the stramonium or hyosciamus. Perhaps the stomach and intestines are the suffering organs, and then we shall equally be able to say whether Arsenic, Corrosive sublimate, or some other deleterious substance, having an affinity for those organs, has given rise to the existing symptoms. In one case we may call the disease cerebral, and in the other gastro-enteritic; and we quite readily detect the shades of difference in the pathological state of the suffering organs. It is our appreciation of *this difference*, even though it may be slight, that enables us to select the appropriate remedy when we find *similar* pathological states present from morbid causes. It is only *by* or *through* an intimate knowledge of disease, as it is presented in its individuality, combined with an equally intimate knowledge of the pathogenesis of individual remedies, that we can hope, or expect, to prescribe with that certainty of success that will alone secure to our profession the position of a science; for all science has its *foundation* in law. It is not sufficient that we have a law of cure by which we profess to be guided, but we must thoroughly understand *what* is to be cured, as well as the means to accomplish it; otherwise our efforts will prove uncertain, and often mischievous. Medicines, like diseases, act dynamically and also specifically. Morbific agents (unless mechanical or chemical), operate in such a manner as to destroy or pervert the harmonious influx between the soul and body, thus causing perversion of function, change of structure, and if sufficiently intense, destruction of tissue and death. Hence, in proportion to the intensity of action, or the inherent power of the cause, will be the severity of disease. At times, only exciting the vital forces to increased resistance, constituting what is called the sthenic condition; at others, more or less completely overpowering them, causing what is termed the asthenic type. In both cases the power is active, and may be the *same*, only varying in intensity.

These predicates are equally true of medicinal agents. They must be dynamic, and capable of affecting the organism, through the changes they induce on those forces, the uninterrupted influx of which is necessary for the health of the material body. For whether life first manifests itself in a primordial cell of infinitesimal, or grosser proportions, there *must* be a *primum movens*, which Muller declares is nothing less than the rational soul itself, which thus clothes itself

in material form ; between which and such power there must ever be a current of living force. Hence, all changes, effected either towards disease or health, must be by agents acting upon these life forces through the medium of the senses, or by agents changing the living influx, through impressions made on the nervous filaments of the diseased organs themselves. Disease, then, is but the result of some agent, inimical to life, acting upon the life giving forces of the organism, and may always be regarded as a greater or less approximation to death. Such agent may be, and often is, occult and imponderable. Poisons may cause destruction of tissue and consequent *death*, by virtue of their chemical or caustic action, but medicines *cure, only* by virtue of their capability of affecting the life force, and they do this in consequence of their inherent power, which, like that of morbidic agents, is often occult and imponderable. And *this*, to effect a cure, must act upon the diseased part primarily and principally, and in the direction of the life forces. We *only* know what part or tissue is effected, by carefully noting the symptoms evolved, and revealing their meaning by pathological research ; so we know what part or tissue any medicinal agent effects, *only* so far as the symptoms it produces correspond with those which such pathological research informs us are indicative of *disease* of such part or tissue. All medicines are eclectic affecting certain organs primarily, and others secondarily. Thus, aloes *primarily* affects the rectum, opium the brain, and tartar emetic the stomach ; and although two or more remedies may have an affinity for a certain part, yet *each* differs from the *others* in its effects, often but *slightly*, yet none the less *certainly*. Hence, each can only be adapted to a *particular* state, corresponding to that which it would itself produce ; for only in this manner can it act directly upon the diseased part. Hence, like symptoms proceed from the same parts being affected in a similar manner.

Analogous remedies have these shades of difference, and the same remedy will produce somewhat dissimilar symptoms in different persons. But all these differences, and shades of differences, only correspond to the same, in diseases of the same generic type, affecting similar organs in different persons. Hence, there is a close analogy between the action of morbidic, and medicinal agents ; and the more minutely and carefully we trace out this analogy, the more certainly and speedily we shall be able to accomplish that purpose, which has been stated to be the end of all medical science, viz : the cure of disease. When we are able *certainly* to detect the nature of any given case of disease, together with the changes that have taken place

from the healthy state, with all the slightest shades of difference induced by age, sex, temperament, &c.; then only, shall we be able to bring our intimate knowledge of *Materia Medica* into the best possible use in the cure of our patients. Medical practice will then have attained to the dignity of a science; for it will then rest upon, and be guided by, that which all science *ever* rests upon, and is *guided* by, viz.: law. And this *law* will be that of similarity between the diseased states, produced by morbid agents, and the diseased states brought on by medicinal agents, acting upon healthy organisms, when taken in sufficient quantities, and for a sufficient length of time to develop their full effects. Then will have dawned that era in medicine (may we not hope it will be golden), in which healthy organs will not be made to directly suffer for the sins of a diseased neighbor; but remedies will be given that act directly on the diseased part for which they have an affinity, and to which they bear a pathological relation. Thus the *citadel* of the destroying angel will be attacked, and not his outposts.

But we must not expect medicine to ever become what is called one of the exact sciences. The astronomer and the chemist has to deal with dead matter, and can calculate the strength of the forces operating; the amount of resistance to be overcome. The physician has to deal with the living tissues, subject to conditions and circumstances beyond his control. We cannot mathematically estimate the strength of hereditary predisposition. We cannot weigh or analyse those hidden forces, whose deleterious influence we must combat, and if possible overcome. We cannot tell precisely what inroads the disease has already made on the integrity of the intimate and primary tissue of organs. We cannot calculate how much the vital forces have been weakened, and the consequent powers of resistance lessened, by intemperance in eating and drinking; by improper modes in dressing, and the thousand follies in which people take delight. We must remember, that,

“ All our views may come to nought,
When every nerve is strained.”

It is difficult to always so adapt the strength of the remedy to the susceptibility of the diseased part, as to bring its curative power into the best possible relation, that we may obtain the most complete results, the case admits. In these respects, medicine is but the analogue of some other sciences. Agriculture is such an one. No one, however skilled and learned he may be, can till the soil, and make definite calculations as to the result. As in medicine, there are conditions and circumstances attendant and impending, over which he

has not, nor can have absolute control. There are forces operating, the strength of which he cannot mathematically estimate. After every known condition has been fulfilled, every possible degree of prudence been taken, and the most vigilant sagacity been exercised, his most reasonable anticipations may fail. The same means which succeed at one time, fail at another. Yet the future of medicine is bright, compared with the past. What Newton did for astronomy, Laviasser for chemistry, and Haller for physiology, Hahnemann did for medicine. He discovered a primary law, or fact, around which all our theories must revolve, and to which they should ever point. This is supreme, and governs all curative action. Under its influence the practice of medicine becomes rational, inductive, steady, progressive, and reasonably certain in its results; subverting theoretical speculations and dogmatic rules; bringing therapeutics into harmony with the vital forces of the organism. Medicine thus becomes the handmaid of Nature, aiding and assisting her to overcome the obstacles to her harmonious and consequent healthy action. Let us, then, carefully learn the pathological conditions as the basis of therapeutics. Here, as in the other sciences, hypothesis need no longer be tolerated. Medicine ought not, and true medical science does not, acknowledge her as a legitimate servant. The cyclus of her empire is passed, and the genius of rational induction is now the only power under whose influence the votary of truth presses forward to conquests in the fields of knowledge.

Societies.

MICHIGAN HOMŒOPATHIC INSTITUTE.

Sixth Annual Meeting.

The Sixth Annual Meeting of the Michigan Homœopathic Institute was held at Detroit in the basement room of the Central Methodist Church, on Tuesday, the thirteenth of June, 1865.

In the absence of the President, Dr. J. M. Long, of Coldwater, was called to the chair.

On motion of one of the members, an invitation was extended to Professor Beakley of the N. Y. Homœopathic College, and Professor H. C. Allen of the Cleveland Homœopathic College, to participate in the deliberations of the Institute.

The Committee on Publication made a verbal report which was accepted.

Dr. F. X. Spranger of Committee on *Robinia pseudo-acacia*, made a report which was accepted.

Dr. L. M. Jones made an interesting report on the subject of Drug Provings.

The order of business was then suspended, and the Annual Address delivered by the President, E. H. DRAKE, M. D.

On motion of Dr. A. Walker, the thanks of the Institute were tendered to Dr. Drake for his interesting and able address.

Prof. Beakley then addressed the Institute, warmly commending the address of Dr. Drake, and congratulating the Michigan Homœopaths at the success of the Institute.

On motion of Dr. Craig, the Institute voted to publish the address.

Dr. Drake, of Committee of Homœopathic College, made a report which was accepted.

Dr. A. Walker, of Committee of Obstetrics, made a verbal report which elicited an interesting conference, participated in by Doctors Doy, Patterson, Drake, Beakley, Sprague, Lamb, Niles, Eldridge and Albertson.

Dr. Roberts, of Committee on Medical Electricity, made a report which was accepted.

Dr. I. D. Craig, of Committee on Dose, made a report which was received.

Dr. Doy reported an efficient mode of cure of Itch.

Professors E. M. Hale, J. Beakley and H. C. Allen, were unanimously elected to honorary membership.

Dr. E. A. Lodge, of Committee on Hygiene, presented a paper on this subject, which was received and commended by vote of the Institute.

Dr. R. Pengelly, of Niles, was elected a member.

Drs. T. B. Lamb, F. Woodruff and H. B. Bagley, signed the Constitution and By Laws and were elected to membership.

An election by ballot for officers for the ensuing year, resulted as follows:

President, A. WALKER, M. D., of Pontiac.

Vice President, E. H. DRAKE, M. D., of Detroit.

Secretary and Treasurer, E. A. LODGE, M. D., of Detroit.

Censors, Drs. J. A. Albertson, Smith Rogers, E. H. Drake, N. B. Covert and A. Bagley.

Dr. A. Walker was appointed to deliver the next Annual Address. Dr. J. M. Long alternate.

It was agreed that the next meeting of the Institute shall be appointed for the third Tuesday of June, 1866, at Detroit.

The following preamble and resolution was then offered and adopted :

Whereas, The project of erecting a National Monument to the memory of Abraham Lincoln, late President of the United States, at Chicago, has been presented to the Michigan Institute of Homœopathy, assembled at Detroit, this 13th day of June, 1865. Therefore

Resolved, That this project meets the full approbation of this Society, and it is hereby cordially recommended to the concurrence of the homœopathic physicians of this State.

Resolved, That the following named gentlemen be and hereby are appointed a Committee to present the subject, either personally or by letter, to every member of the homœopathic profession in the State : Drs. E. A. LODGE, E. H. DRAKE, A. WALKER, A. BAGLEY.

[Money may be sent to Geo. M. Kimbark, care Hall, Kimbark & Co., Chicago, and notice of the same sent to Dr. Shipman, Chicago, who will see that the autograph and sum of money are properly recorded.]

The following special *Committees* were appointed to report at the next meeting :

On Honorary Membership, Drs. A. W. Walker and S. W. Pattison.

On Publication, Drs. E. A. Lodge, and E. H. Drake.

On High Dilutions, Dr. E. H. Drake, E. R. Ellis, I. D. Craig, A. Walker and F. Woodruff.

On Cases Cured with one Remedy, Drs. G. T. Rand, I. N. Eldridge, J. B. Tuttle.

On Provings of Indigenous Remedies, Drs. L. M. Jones, P. H. Hale, H. B. Bagley.

On Dose, Drs. C. J. Hempel, Isaac Douglass, C. A. Williams.

On Surgery, Drs. E. B. Ellis, A. J. Sawyer, Smith Rogers, A. Farnsworth.

On Pathology, Drs. E. H. Drake, A. J. Sawyer, J. R. Hyde.

On Obstetrics, Drs. A. Walker, J. W. Pattison, A. Bagley.

On Medical Electricity, Drs. W. J. Calvert, Joseph Sill, E. L. Roberts, J. A. Albertson.

On Physiology, Drs. J. M. Long, A. W. Walker, F. Finster.

On Homœopathic Colleges and Homœopathic Professorship in State University, Drs. C. J. Hempel, E. H. Drake, F. Woodruff.

On Small Pox, Drs. Lewis Taylor, F. X. Spranger.

On Delegates to other Societies, Drs. John R. Smith, A. R. Ball, Orrin Fowle.

On Anatomy, Drs. S. N. Coons, T. R. Huntington, C. J. Covey.

On Chemistry, E. C. Wilbur, A. B. Spinney, T. B. Lamb.

Dr. I. D. Craig offered the following, which passed unanimously :

Whereas, Certain unprincipled persons, claiming to be physicians, are in the habit of advertising in the public newspapers, medicines to produce abortion. And

Whereas, The great number of these advertisements show not only that there are an alarming number of abortions produced, but that the public and press do not fully understand the nature of the act. Therefore

Resolved, That it is the duty of medical men to enlighten the public on this subject, and to protect the health of our American women and their children. The commencement of human life dates from conception, and the intentional destruction of the foetus at any age is *wilful murder*, and we consider that it is the duty of Legislators to repeal the existing laws on this subject, and to enact others, making the punishment of this crime equal to any other murder.

Resolved, That as the press should be the guardian of morality and decency, we call upon the proprietors and editors of our public journals to exclude such advertisements from their columns.

After passing a vote of thanks to the Central Methodist Church for their kindness in giving the use of their room, and to the homœopathic physicians of Detroit for their hospitality, the Institute adjourned.

The sessions of the Institute were very interesting and profitable. Physicians present: Drs. Drake, Spranger, Schmidt, Albertson, Huntington, Roberts and Lodge, of Detroit. Dr. J. M. Long, of Coldwater; Dr. L. M. Jones, of Brooklyn; Dr. I. D. Craig, of Niles; Dr. T. B. Lamb, of Farmington; Dr. Cook, of St. Clair; Dr. Douglass, of Romeo; Drs. A. Walker and A. W. Walker, of Pontiac; Dr. J. R. Hyde, of Eaton Rapids; Dr. W. J. Calvert, of Dexter; Drs. Pattison and Pierce, of Ypsilanti; Dr. Finster, of Port Huron; Dr. I. N. Eldridge, of Flint; Dr. John Doy, of Battle Creek; Dr. E. B. Sprague, of Owego, New York; Professor J. Beakley, of New York city, and Prof. H. C. Allen, of Cleveland, Ohio; also several students and friends.

ON PROVINGS.

BY L. M. JONES, M. D., BROOKLYN, MICH.

Report read before Michigan Institute of Homœopathy, June 13, 1865.

Twelve months since it was my pleasure to read, before this Institute, a paper setting forth the most sure, perfect, and therefore, most reliable manner of procedure in determining the pathogenetic effects and true therapeutical application of remedies in homœopathic practice. To-day I propose to show, in the first place, the great responsibility now resting upon the homœopathic physicians of the great North West, to continue to prove new, and to more thoroughly prove partially proven remedies. In the second place, the great precaution we are to use in accepting remedies to be used in our practice, unless they come to us well recommended by thorough provings, made under the direction of *loyal homœopaths*. It cannot be successfully denied, that quite a number of valuable remedies have been added to our materia medica within the last ten years, and that the work goes bravely on for making still more valuable additions. A few years since, our beautiful system was but in its infancy, but to-day it stands out in manly proportions, bidding defiance to all opposition. In whatever land or nation she has planted her standard, her beneficent advantages are acknowledged and received by a very respectable proportion of all classes. No earthly power can possibly stay her onward march. For the physicians of the Northwest we have a labor to perform that is particularly interesting to ourselves. We have here a variable climate, and one that differs somewhat from all others. And thus the surrounding influences create different types of disease; not wholly so, but rather they develop different symptoms. I am well aware that I am here taking disputed ground. It was said emphatically before this Institute when last convened, by *one* who stands high in *medical science*, that inflammation of the lungs in Germany, was inflammation of the lungs in Michigan. Very true, but did the Professor intend to let the idea rest upon the members of this Institute, that the same remedies are to be employed in inflammation of the lungs, dysentery, or typhoid fever, in this climate that he would employ for the same diseases in Germany. I cannot think he so intended it, but if so, you may require proof to maintain my position. Very well. Is it not true that Bryonia, Rhus toxicodendron are the principal remedies used in typhoid fever in many portions of the Old World? Is it not also true, that nearly every work published in the old and many in the eastern part of this country, puts down Bryonia

and Rhus Tox. as specifics for the typhoid fever as it appears in their respective localities? It is also just as true that the disease is treated very successfully with these two remedies, far outstripping the success of the allopathic drugs. How is it with us here in Michigan? Physicians of the Northwest, do you, or can you depend upon Bryonia and Rhus tox. to combat the symptoms of typhoid fever as it generally appears in your particular localities? Prof. Hill and other prominent western teachers, say they have no confidence in them in typhoid, as it appears in this climate. Why not? Are we so very stupid that we cannot determine the proper attenuations, or determine the proper length of time before we repeat the dose? Can we afford to dispense with the new provings of Baptisia tinc. and Macrotys, and still depend on Bryonia and Rhus. tox. It is one of the misfortunes of our school, that when a new remedy comes up, it is seized by some practitioners, and they, losing sight of its specific indications, prescribe it in all diseases, and under all symptoms and circumstances. This has been particularly so with Baptisia tinc. Yet this weed that grows so abundantly in some particular localities of the Northwest, is truly a superior remedy in typhoid as it appears in this State. Teste intimates that plants are adapted to cure the diseases which infest the same localities. When I was practicing South, on the latitude of New Orleans and near the Mexican gulf, it was my fortune to treat some cases of fever and ague, though not as frequently, perhaps, as in Michigan. As in this climate the tertian type appeared almost in every case. My treatment was substantially as follows: During the chill, Nux v. 6, a dose every fifteen minutes. For the fever, Aconite 3d, a dose every hour until the sweating stage commenced, then Ipecacuanha, third or sixth a dose every two hours during the intermission; and I scarcely, if ever, failed. My patient recovered after having two or three chills. Ipecacuanha was the remedy on which I relied to eradicate the disease from the system.

Nearly the same treatment was followed by many other homœopathic physicians with whom I conversed, and the same good results obtained. Do we think of treating fever and ague in Michigan with Ipec. Scarcely one of us, I will venture to say. Why not? Because the symptoms as they appear in this climate, do not correspond to Ipecac. The surrounding influences make it a different disease, more particularly corresponding to Eupatorium perfoliatum or China. Most frequently, however, to Eupatorium, which plant is found growing so abundantly all over the Northwest. Similar instances could

be given in other diseases, but thinking the above sufficient, I will not refer to them at this time.

These things, then, being great truths, does it not follow that we, the physicians of this great and beautiful Northwest, have a great labor to perform? As this particular locality is rich in agriculture, and rich in everything calculated to make men comfortable and happy, why not, then, may we look for a swift return of our labors, bestowed by us in a proper direction? And the reward will not only be richly returned to ourselves, but will prove a great blessing to all others.

I must pass over very many things that I would like to say, and come to the second part of my subject, which is, the precautions we are to use in preventing *guess work* entering into so-called provings. These and the following remarks are more particularly directed to the junior members of the profession. Prove all things and retain all that is found good and absolutely useful. In our researches for truth, we should be particularly careful in forming hasty judgements upon mere assertions of any one individual. He will tell you what great things he has performed with a particular remedy. If this is all the proof he presents, his article should be received with caution, or permit me to say, with suspicion. It is just as foolish and absurd to believe a thing without sufficient grounds, as it is to reject it without adequate reasons. Not many years since, a member of our school told us, through our journals, that Aconite, that great and powerful remedy, was not at all to be depended upon, and should only be remembered by the profession among the things that were. And in its place he would depend on *Veratrum viride*. Yes, indeed, with one grand flourish of his fluent pen, he would sweep Aconite from our *Materia Medica*. We soon find him disappointed in his success with *Veratrum*, and advocating *Gelsemium* in all forms of fevers. And again we find him disappointed, gloomy and desponding, declaring there has not yet been discovered a remedy on which to depend in fevers—no balm to cool the feverish brow. No remedy to bring down the fever, nothing to regulate the accelerated pulse and diminish arterial excitement. Let the fever run like wild fire if it may, until it has spent its whole force, then cure the actual disease with remedies which might cover the remaining symptoms. But we do not long find him in this awful dilemma. A year or two latter, we find him a strong advocate for Aconite in its proper sphere, and for *Veratrum* and *Gelsemium* for their proper and specific symptoms. And thus, at last, after all this unscientific preamble, and perhaps deceiving no one more than he himself had been deceived, we find he has a ra-

tional, sound and progressive mind. A few months since, while looking over a medical journal, we found an article written by an M. D., upon the use of a certain very new, and as yet, to our minds very imperfectly proven remedy, with which he claims to have cured 71 out of 73 cases of true diphtheria. Now there is no single remedy which expresses the whole type of diphtheria. Each stage has its peculiar individuality, therefore, the remedy that cures must express the individual type of each stage of the disease, in order to be homœopathic or curative. Though his remedy may be a good one, the position cannot be maintained on scientific principles; therefore, the position must fall to the ground. Numerous similar articles have found their way into our journals, and probably others will appear; and the physicians who receive them, and adopt them without further investigation, will probably find that all are not diamonds that glitter so brightly in the sunlight. With our minds fixed substantially upon that natural and sublime law, *similia similibus curantur*, such articles can do no harm. They only serve as light-houses that we may more effectually shun the unexplored, and therefore, dangerous coasts. When scientific men cease to labor for self-aggrandizement merely, but learn to live and labor only for the advancement of that beloved institution which we pretend to represent, when we each labor like scientific men, according to the amount of ability given us, then and not until then will the fruits and beauties of homœopathy be recognized from all stand points, and the reward of our labor be returned to us as a fraternity an hundred fold.

REPORT ON OBSTETRICS.

BY A. WALKER, M. D., OF PONTIAC, MICH.

Presented to Michigan Homœopathic Institute, June 13, 1855.

Not being aware of my appointment on the Committee of Obstetrics until within a few days past, I am not prepared to make any formal report. Nevertheless, I will relate a few cases that have come under my observation within a short period, and have resulted disastrously.

Ordinary cases require no elucidation, as the members of the Institute are all doubtless familiar with these. Extraordinary cases, especially such as terminate fatally, are of peculiar interest; and as such cases do sometimes occur, this department of medical practice becomes intensely important.

Without further preliminary remarks, I will proceed to relate the cases.

CASE 1st.—MRS. O., æt about nineteen years, took a severe cold about the first of February last, having been pregnant about seven months. Myself and son prescribed for her several times, by which she was much relieved. Was quite comfortable and about house till Feb. 12th, when she awoke in the morning with a headache, which increased in severity till about 11 o'clock, A. M., and then went into convulsions, which would last for several minutes, followed by quietude for an indefinite period, and then the convulsions occur again.

A messenger came to me, saying that Mrs. O. was either dying or in a fit. I hastened to her dwelling; arrived about 12, M. She was then lying quietly on the bed, but entirely unconscious. Prescribed *Gelsemium*, 1st dil., and *Hyoscyamus*, 3d, alternately, from five to fifteen minutes apart.

About 1 o'clock consciousness returned, and she expressed herself as feeling very comfortable, except some pain in her head. Repeated medicine less frequently. About 3 o'clock I left her feeling much better, and went to visit other patients, and returned again about 5 P. M. Was informed that soon after I left, she went into another spasm similar to those she had in the morning, and was now in a comatose state. It was not long before another convulsion came on, which gave me an opportunity to witness its characteristics. The head would be drawn backward and to the right side, fingers and thumbs drawn rigidly into the palms. The limbs and body very rigid, sometimes the body resting on the head and heels. Convulsive motion of lower jaw, endangering the tongue, frothing at the mouth, and the eyes turned so as to hide the corners. The pulse would become rapid, even over 200 per minute, and almost imperceptible. After the convulsion subsided, the pulse would increase in volume, and sometimes fall to 120 or lower, until the spasm returned again. Suspecting that labour might possibly be in progress, I made examination and found my suspicions true, os uteri open to the size of a dime. This was about 7 o'clock in the evening. Consciousness returned a short time after this, but continued only a few moments. Parturition progressed slowly, and as soon as there was sufficient dilation of the os uteri to admit the use of the forceps, I proceeded to use them, and delivered her, without difficulty, of a child which probably had been dead for several days.

We now indulged the hope that consciousness would again return and convulsions cease, but in this we were disappointed. She lin-

gered on till 11 o'clock of the 12th of June, about twenty four hours from the outset of the convulsions, and died.

I would here mention that my son, Dr. A. W. Walker, accompanied me on my second visit and remained through the night. *Aconite*, *Belladonna*, *Hyoscyamus*, *Ignatia*, *Nux*, *Secale*, &c., were administered during the treatment. Amelioration of the symptoms occurred at intervals; but whether it was the effect of the medicines or a part of the programme of the disease, we do not pretend to decide.

CASE 2d.—MRS. H., æt twenty-four, of a lymphatic temperament, and of a scrofulous diathesis. After puberty was irregular in her menstrual periods, sometimes passing over two, three or four periods in succession. Generally had a chlorotic and anæmic appearance. After her marriage her health continued rather indifferent, until she became pregnant. Her general health then seemed to improve, and for the first six or seven months enjoyed much better health than usual. But a change for the worst was now but too manifest. She began to feel languid, indisposition to exercise, either mental or physical, lost her appetite, indigestion impaired, bowels irregular, anasarca became general, the mouth sore, the skin had a bloodless, waxy appearance. In short, the citadel of life seemed to be assailed at every point. For two or three weeks before her confinement she was unable to get from one room to another without assistance. She also complained of a sense of coldness in the uterus, and of a heavy, dead weight. Her symptoms assumed such an unfavorable aspect that we almost despaired of her completing the period of gestation.

Early in the morning of March 28, she was taken in labor. Pains were regular and not frequent till about 3 o'clock P. M., when they became quite forcible, and rather frequent. Parturition went on favorably till the head of the child presented at the lower strait, when the pains become inefficient and progress came to a complete stand. Her strength seemed to be rapidly failing, and I resorted to the forceps at once, and delivered her of a female child without difficulty. Her strength continued to wane, and she died in less than an hour after delivery.

The remedies used during the progress of her sickness were *Arsenicum*, *China*, *Ferrum*, *Phosphoric*, *Muriatic* and *Nitric acids*, *Macrotys*, &c., each as the symptoms seemed to indicate their use. After her delivery, *Arsenicum* and *China*, *Brandy* and *Bourbon whisky*, were administered without any perceptible effect, for good, at least. As the process of parturition was perfectly natural until the expulsive force failed, I can account for the result in no way, only

by assuming that the vital force became exhausted beyond recuperation, before the necessary work was completed.

I have related these cases, hoping that others, members of the Institute, may in their wisdom, give us light on this subject that may be of practical benefit.

THE AMERICAN INSTITUTE OF HOMŒOPATHY.

CINCINNATI, O., June 8, 1865.

MY DEAR LODGE:—I wish you were here in the Queen city. Not that I wish you any ill, by subjecting you to the intolerable heat, muddy drinking water, and endless noise of this vast town; but I know it would do your homœopathic soul good, to look in upon the august (notwithstanding it is June), body of medical men, each one of whom is like a leyden jar, surcharged with electricity. And you ought to hear the brilliant discharges, as they pass from one to the other. Brooklyn, N. Y., sends us down a *Guy*, who is appropriately used to tie us up to parliamentary rules, and by whom we are also *guyded* very smoothly along the devious channels of debate. He writes himself S. S., but we all think him a good deal more than half a man, and would advise him on pharmaceutical grounds, to petition the Legislature for a change in his initials.

The numerous family of Smiths, I think has only one delegate present. I would suggest an inquiry be started, whether or no there are any idiosyncrasies in the Smith family, to prevent them generally becoming homœopathists? And out of regard for their forbearance in sending only one of their number, we unanimously made him our Treasurer. St. Louis sent us up considerable more mercury than sulphur, in their *Hellmuth*, and we chained it to the provisional Secretary's chair. Chicago greeted us all *Hale*, and indeed all parts of the country turned out a good delegation, too numerous to be mentioned in detail, and I forbear to *punish* the Institute too far.

The number of German physicians present is also large, and in general discussions they exhibit abilities equal to any. Numerous reports are being handed in, either by person or proxy, among which are, The treatment of compound dislocation of the long bones, by Prof. S. R. Beckwith, of Cleveland, an able paper well presented by proxy; Fibroid tumors of the uterus, by Prof. W. T. Helmuth, of St. Louis, amply illustrated by specimens, together with drawings of several important surgical cases, by the same. Botany and Toxicology, by Prof. E. M. Hale; besides others I do not call to mind. But the principal matter of interest was the spicy discussion on *Pharmacæa*

and Pharmacutists, which sprung up very unexpectedly yesterday and to-day. I have often felt to complain that I was a doctor, but I have just had reason to thank God that I was not a Pharmaceutist. O these ungrateful doctors! asking all perfection of the pharmacies, and thankful for nothing, though much of their success is due to the pains-taking labor, bestowed on their preparations by the pharmacist. I fancy the ears of these guilty men, the world over, must have tingled with shame, as the graphic picture was painted, of their muddy tinctures, and dirty pellets, and dusty vials, and impure alcohol. But after all, it was amusing to see some of the honorable gentlemen, whose offices at home, to my certain knowledge, were the counterpart of a bar room and drug store combined, berate so roundly the pharmacist, who happened to have a little cork dust in his dilutions.

An effort was made to have a committee appointed, one for each pharmacy, who should inquire into and report on the condition of the said depositaries of medicine. But the project failed, and so the pharmacutists are to be unmolested for at least one year more. The physicians of Cincinnati have spared no pains to make our session a delightful one. We are to hold our next session in Pittsburg. May you and I be there to see. Yours, W.

CLEVELAND HOMŒOPATHIC COLLEGE.

The Trustees and Faculty have just issued their Announcement for 1865-6, and copies may be procured at this office, or by addressing the Registrar. The addition of Prof. E. M. HALE to the Faculty will be a source of gratification to his friends; and the patrons of the Institution will feel assured that the course of lectures on Materia Medica will be as complete in his hands as could be desired.

NEW YORK HOMŒOPATHIC MEDICAL COLLEGE.

The Sixth Annual Prospectus and announcement of the New York Homœopathic Medical College, shows that this Institution is in a flourishing condition. We hope that it will continue to prosper.

AMERICAN INSTITUTE OF HOMŒOPATHY.

We have a report of the last meeting from a valued correspondent, which will appear in August number.

Practice of Medicine.

For American Homœopathic Observer.

CHRONIC DIARRHŒA OF CHILDREN.

BY DR. F. X. SPRANGER.

Translated from Dr. Kalkas' "Homœopathic Therapeutics."

The chronic intestinal catarrh (as the Germans call it) of children, presents itself most always with diarrhœa, which is mostly obstinate and exhausting. (*Diarrh. perniciosa infantum.*)

In the intestinal canal of those that have died of this disease, we find nothing more than swelling, paleness and anæmia of the mucous membrane. No tubercles, no morbid swelling of the mesenteric glands, no ulcers, etc., etc., which diseases are frequently looked upon as the causes of the malignant intestinal catarrh of children. As a consequence of the continual discharges, there takes place thickening of the blood in the large vessels, which are filled with dark, tar like blood, while the capillaries appear empty. When the disease is of long duration, we almost constantly find the œsophagus and mouth affected with canker. Not seldom the mucous membrane of the stomach and intestines are softened, which condition is looked upon by many anatomists only as a post mortem appearance.

The chronic intestinal catarrh of children sets in, in most of the cases, after ablactation or during the period of teething, either by improper diet, over-feeding or negligence. It is sometimes a secondary concomitant to Pneumonia, Typhus, &c., &c.

In the most frequent cases, the first slight diarrhœa, which is generally mucous with acid reaction, is not much taken notice of; this is especially during the teething period, as so many mothers are taken with the idea that such a diarrhœa is beneficial, and will prevent a great many dreaded diseases; hence, they not only like to see it, but even fear to have it "stopped" by a physician. The careful observer, though, will soon perceive that the most blooming children will very soon become pale, and wither, particularly if the discharges are very copious and watery. As the diarrhœa continues longer, the children become more and more emaciated, weak and anæmic, have the appearance of old age and an unquenchable thirst entire day and night, and want to be carried on the arm incessantly. It cannot carry its head erect, but lays it on the shoulder of the nurse. If they are unclothed

or laid dry, they lie quite motionless. While asleep they only half close their eyes, and as soon as they awaken, they want to drink and eagerly reach for the glass, which they will not let loose again.

With the same eagerness they frequently take nourishment, but as soon as they have eaten or drank it, a rumbling noise in the bowels can be heard, while a watery, colorless and very offensive stool passes, which can only be distinguished from the urine by its fœtor. In many cases we perceive on the wet diaper single particles of green mucus and undigested food. The abdomen is commonly tympanitic; during a long duration of this disease they become hydræmic, œdema of the lower extremities, scrotum or external female genitals takes place, the fontanelles sink, the skin becomes dry like parchment, the corners of the mouth become sore, with apthæ in the mouth and throat, and the marasmus attains its highest degree.

In consequence of the developing anæmia of the brain, the children become soporous, lips and finger nails become livid, the skin cool and lax, and convulsions set in which end in death.

The duration of this disease may be from weeks to months. Frequently intercurring attacks of acute intestinal catarrh takes place, which distinguish themselves by severe gripings, more or less tenesmus, redness and soreness of the anus. Under favorable circumstances occasional remissions take place, during which the children recover partially; however, after the slightest error of diet or bad care, an acute catarrh will set in, which will again become chronic.

The termination of this disease is recovery, if the diarrhœa is checked and the children are brought under better nutrient conditions. But if the diarrhœa continues obstinately, even the best changes in diet are fruitless, and the children will become more emaciated, and finally perish.

In such cases the prognosis is always doubtful; the most robust children succumb, if the diarrhœa cannot be checked. According to our special and manifold experience, the most desperate cases, even in the highest degrees of anæmia, debility and even dropsical swellings are curable with homœopathy. We have reported a very instructive case of this kind, in the *Nenen Zeitschrift fuer hom. Klinik* 1857, No. 1, pp. 4.

In treating this pernicious disease, we have two equally important tasks to accomplish. First: To check the diarrhœa as soon as possible. Second: To regulate the diet and care of the children.

The mitigation of the diarrhœa is of the greatest importance; we have been convinced in many cases, that children can recover, even

if there should not be any considerable changes in dietetic rules. Still, the success is better and surer at any rate, if the medical treatment is assisted by proper hygienic care.

Chronic diarrhœas of children, which have been of considerable duration, and are slimy, frothy or fæcal and without any apparent anæmia, debility or emaciation, if they are painless and preceded by rumbling in the bowels, with considerable tympanitic distention, may be remedied the surest with *Phosph.* 3--6.

We give of this remedy one drop every two or three hours, with sugar of milk, or five or six drops in one half tumbler full of water, and let the patient take a half teaspoonful every two or three hours. At the same time we provide, as will be mentioned below, for proper nourishment and care, and generally see the number of evacuations lessen in two or three days, and the children become more lively and active. Frequently this remedy will suffice to a complete recovery, without any necessity to resort to other remedies.

If no improvement takes place in two or three days, we administer under the same circumstances and in the same way, *Phosph. acid.* 3. Should this medicine also fail to relieve, we can rely upon *Calc. phos.* 3. surely, especially if the children are cutting teeth and are troubled very much with sleeplessness.

If the stools are painless and watery, and if we already notice the first few days, paleness of the face, laxness of the muscles, especially the thighs, sluggishness in the actions and ill humor, we give *Arsen.* 3--6, even if there should be no other characteristic indications for this remedy; for the above named symptoms are sufficient to draw the attention of the observing physician who will recognize the danger the children are in, and obviate it. After this remedy, in most of the cases, we see the serous discharges gradually lessen and the health generally improve.

If the serous discharges have continued for a longer time, and the children have become considerably anæmic, debilitated, poor, irritable, sleepless, miserable, having the appearance of old age, with violent thirst, and the stools of a very offensive smell, *Arsenicum* will be so much the more indicated. In such like appearances this medicine is a real panacea; it will act as well in low as in high dilutions, and does not refuse its beneficial effect even if the highest degree of emaciation and hydraemic appearances are present. We know of no remedy which suits this complex of symptoms better! There is no remedy of a more decided and reliable action in this disease. We

generally give 6 to 8 drops in half a tumbler full of water, from half to one teaspoonsfull at a time.

As the first symptom of improvement we will notice in a few hours, a decrease of the tormenting thirst; afterwards the children become more quiet, they whine less, get some sleep, which strengthens them; already in 24 to 48 hours the quantity as well as quality of intestinal secretion will improve.

When the improvement is going on, under the use of this agent, in less frequent doses, the appetite increases very much, the countenance improves, the strength gains, the children are more friendly and lively, the discharges are more consistent and begin to form.

If there is such a torpid state of the bowels connected with the anæmia, debility and collapse, that the ingesta pass off as soon as they are taken with audible rumbling in the paralyzed bowels, in the form of colorless serum, *Argent nitr.* 2--3 is the remedy which is capable of removing the worst of these symptoms in a very short time.

In some of the worst and most difficult cases that have been declared incurable by allopathic physicians, we have brought about a cure with these two remedies, in an almost incredible short time.

As a matter of experiment to those not belonging to our school, *Argent. nitr.* gr. 1 to 1 ad. unc. quaternor aq. distill, one half teaspoonful to be taken every two hours, would do very well.

Should the serous discharges be mixed with particles of undigested food, and if the weakness of the children is more predominant in a higher degree, such as dropsical swellings, we have found *China* 1 a very reliable medicine. If we do not succeed with this agent alone, we may give it alternately either with *Arsenicum*, or *Ferrum met.* 1, after which signs of convalescence will set in very soon.

DIET.

According to our special observations, we can affirm that in the majority of cases, overloading of the stomach with thick pap, or gruel boiled thick with milk, or the using children to the nursing bottle which is filled with milk, coffee, cocoa, acorn or any other kind of substitute for coffee, is the cause of acute intestinal catarrh, which soon becomes chronic and malignant.

Before all, we must direct our attention to this most injurious mode of nourishing the children during ablactation, and take care that instead of these substances they may get weak animal broths, into which may be ground up and boiled crackers or farinaceous substances, from three to four times in 24 hours. If they refuse to take slightly salted broths, it will be proper to prepare them without

salt and sweeten them with a little sugar. Usually the children like sweetened beverages better, and they also agree with them well.

Instead of those relaxing drinks we let them have rice water or very thin boiled arrow-root, sweetened with a little sugar, to be drunk luke-warm at pleasure. Luke-warm drinks generally agree with children better than the cold, since the latter frequently cause griping and increase the diarrhœa. Let the children drink until their tormenting thirst is quenched. The thickening of the blood requires very much beverage, which should not be withheld, otherwise they would terminate very soon into collapse and anæmia of the brain.

Many practitioners recommend the use of raw beef in such cases, which should be carefully cleared of all fibres or fat, and then grated up very fine; it will be found to be very successful. Although in the most severe cases, according to our mode of treatment, we do not find it necessary to resort to this uncommon but certainly very excellent article of diet.

As soon as the diarrhœa gets better, and the patient gets a more active appetite, we may give them stronger soups, to which small particles of meat may be added, and gradually go over to animal diet. To strengthen the constitution, we let the convalescent drink dilute beer or dilute red wine sweetened with sugar. (?)

Luke-warm baths during the diarrhœa weaken the children very much, therefore, it is better to wash them frequently and carefully, and diligently give them fresh and warmed clothing. The sick chamber should be *very* temperate and frequently ventilated with care. When this cannot be well done on account of bad weather or cold season, the rooms should be scented with evaporating vinegar, smoke of juniper berries or sugar. They also should be heated if the season is too cold, especially at night, by which intercurring acute attacks of catarrh may be best prevented.

Note by the translator.—This disease, our so-called summer complaint or cholera infantum, is the most destructive malady to which children are subject, at least in American cities. Last summer it began in Detroit about the 7th of July. It attacked in most of the cases, children of from five to seven months of age. It would set in with violent, almost spasmodic vomiting and purging of watery and nearly colorless liquid; collapse occurred often so suddenly that in the course of a few hours the patients did not look like the same children. Eyes sunken and turned upwards, nose pointed, color of the surface anæmic, skin cold, more so the extremities, most torturing thirst, and as soon as anything is taken it is thrown up again, convulsions set in,

and without proper treatment, in from three to twelve hours the patients die. If they even passed this stage, they would make a very slow recovery and the case frequently turned into chronic diarrhœa and marasmus.

After a few weeks the disease left the little ones and attacked older children, such as were in their second summer, and then cases ran more of a chronic course.

In such acute cases the first thing always to be done, I think, is to stop the discharges and prevent the collapse. The best agent, according to my experience, I have found to be *Camphora* 3 drops given every five to eighteen minutes without water or any diluent, so as to produce immediately a stimulating effect on the stomach, always being careful not to pour it too sudden upon the tongue as it will catch the breath for a few seconds. Vomiting would even cease, and general warmth reappear.

This medicine may be followed up by *Veratrum* 2d, and as the case inclines to become more tedious, a fever sets in, although the child is pale and the discharges continue, *Aconite* tincture a few drops in a tumbler full of water, of which a teaspoonful may be given every hour or half of an hour. *Arsenic* may soon be given in alternation with *Aconite* or *Veratrum*. I always give these medicines in the 2--3 alcoholic potencies undiluted, one or two drops on the tongue, which combines the effect of the medicine and the stimulating action of the pure homœopathic alcohol, since the medicines can seldom be borne so well in water, and our pure alcohol is so much better than the mass of impure brandy that is frequently given by physicians; here one drop answers the purpose far better than a bulky mixture.

Mercur. dulcis, 2d is very suitable when the diarrhœa becomes more chronic; the stools are very changeable in color, either greenish, white, slimy or chopped, accompanied with tenesmus and griping but no vomiting; if that should also be present, but not of a cholera like nature, *Ipec.* 1st or 2d, either alone or in alternation with the *Merc. dulcis.*, will prove very beneficial.

For American Homœopathic Observer.

THE IMPORTANCE OF ONE SMALL SYMPTOM.

BY DR. AD. LIPPE.

In February, 1865, I prescribed for a child aged five years, (a nervous little girl,) for diphtheria, one dose of *Belladonna*, 200, followed in thirty-six hours by one dose of *Lachesis*, 200. Removed all diphtheritic symptoms, and the case was considered cured. But the

little girl not only left the room prematurely, but went out of the house into the damp air, having been previously much heated by running through the house, and in consequence had a relapse. When I visited her the following day the breathing was very much impeded. She was very hoarse, could not speak, nor swallow even water without much pain. The hoarse, dry cough caused much pain. Another dose of *Lachesis*, repeated afterwards in water every two hours did not relieve her. The throat could not be examined as she would not open her mouth, and resisted every effort to open it. The breathing became more rapid and loud, hoarse and difficult, pulse 140 per minute. *Hepar s. c.* 200, in water, repeated for two days; at first ameliorated her condition slightly, but she soon grew worse. *Bromine* was administered with the same effect. She now not only became very weak from the want of sleep, and painful attacks of a dry, hoarse, spasmodic cough which was worse during the night, and especially after midnight. She also complained of violent stitches in the left ear, pain in the left side of the head, pain in the left side of the neck, where a large swelling with redness and inflammation appeared, which was also worse after midnight. This new symptom was only found under *Kali bichromicum*. Six pellets of the 200th potency (Lehrmann's) were dissolved in four ounces of water, and a teaspoonful administered every two hours for twelve hours. The symptoms becoming all very much ameliorated, the medicine was given at longer intervals. She coughed up a great quantity of diphtheritic deposits and mucus. The abscess on the neck broke on the ninth day without the aid of any poultice, and healed, leaving no trace of the swelling, which had been very large. The child fully recovered.

In March, 1865, I visited a young lady aged thirteen years. She complained of a very sore throat. Pain much increased by swallowing. The throat is full of tough mucus, which she can neither swallow nor raise. Protruding the tongue increases the pain. Pain also in the left side of the head. Shooting pains in the left ear; the left side of the neck is very painful to touch or contact, and much smaller. The tonsils, the left one especially, are much swollen and inflamed. One dose of *Kali bichromicum*, 200, cured her entirely in thirty-six hours. Twenty-four hours after the disappearance of all these symptoms, she complained of the same kind of pain on the right side of the head, and in the right ear. Evidently the effect of the remedy. These pains disappeared without any further medicine.

These two cases are only reported to prove the correctness of a

small symptom. The first case is *not* to be considered a brilliant cure of diphtheria. For the gratification of non-homœopathicians I only remark that *most all* cases of diphtheria which have come under my care, have yielded to one dose of one, seldom two, properly selected homœopathic remedies in the smallest doses. The non-homœopathicians who sneer at such reports, would do better to make the "experiment" before dealing in denunciations.

In the English literature this small symptom is not found. In Dr. Arnith's physical provings it is related on page 448, symptom 130, and then he says: "Violent stitches in the left ear, extending into the roof of the mouth, into the corresponding side of the head and into the same side of the neck, which was painful to the touch and the glands swollen."—MAYRHSFFER.*

* This is a misprint. Should read, "Dr. Marenzeller."

For American Homœopathic Observer.

CASES FROM PRACTICE.

BY F. X. SPRANGER, M. D.

Psoriasis Guttata.

The first number of the *Homœopathische Vierteljahres Schrift* of 1864 contains an article of Dr. Wilhelm Arnold of Heidelberg, treating the question of doses. The first case is *Psoriasis guttata*, which resisted all higher preparations of Arsenic but two grains of 2d decimal trituration once daily, cured the case permanently. I have met similar cases frequently, some of them having been of five or six years duration. *Arsenicum 2d dec.* trituration has always cured them in a short time, providing it was indicated.

NASAL POLYPUS.

The second case is one of Nasal Polypus, which was treated for a long time with *Calcareo carbonica*, with higher and lower dilutions, the lowest seeming to have some beneficial effect. The patient was then put on the usual officinal Aqua calcis, (lime water) a table spoonful to be taken twice a day, mixed with a little sweet milk. In four weeks the patient returned. Not the lightest trace of polypus could be detected.

This winter a young man aged twenty applied to me for treatment, having been under the treatment of five or six most prominent allopathic physicians of this city. One of them, a professor of surgery, pronounced the case cancer of the eye, which diagnosis afterwards he changed. The patient is a plumber, very much exposed to

cold by out door work, has had scrofulous tumors and abscesses of the glands of the neck. After they left him he began to have coryza, which remained and continually grew worse. In the left nostril, soon afterwards a tumor was detected of a yellowish, white color, spongy, moist appearance. This tumor extended higher up, forced its way into the orbit behind the eye, displacing it one-half of its diameter to the left external angular process of the orbit, and protruding about one-third of an inch further than normal. The eye appeared perfectly well, although the cellular tissue of the upper and lower palpebræ would be so infiltrated as to form a large tumor. The lachrymal duct was not obstructed. The passage of air through the one nostril was almost entirely obstructed; only by continued violent efforts to blow the nose, pus-like matter would be discharged, after which the swelling of the eyelids would partly diminish. But to accomplish this, it would require violent straining and blowing for hours. He was downhearted and gloomy. , Great pallor of the face. Had been treated with Baunsheidtismus for some time; was just full of vesicles around the neck, the result of the operation. Prescribed *Mercurius biniodatus*, 2d dec. trit., one or two grains to be blown up into the nostril thrice daily. After eight days the polypus in the nostril had entirely disappeared, but the condition of the eye was the same as before. Now I prescribed Aqua. calcis, a tablespoonful to be taken three times a day mixed with a little milk, at the same time using the Biniodide of Mercury as before. This was about six or eight weeks ago. The patient is now perfectly well, no trace of the disease to be seen. The eye has also returned to its natural position, and the patient is now bright and cheerful. Those physicians that have attended him before, all called his disease nasal polypus except the professor, who diagnosed cancer of the eye, but afterward also called it polypus.

APOCYNUM CAN. IN DROPSY.

I have lately treated several cases of dropsy. The first case being hydrothorax and anasarca, depending on organic disease of the heart, percussion over the region of the heart was entirely soundless. By the use of *Apocynum can.* every sign of dropsy disappeared in two weeks; percussion sound of the chest natural. Patient feeling tolerable well withdrew from treatment, not wishing to take medicine for the heart disease.

Case 2d. A man 80 years of age, found him panting for breath, face bloated, color of the lips, face and finger nails of a bluish-like lead color, lower extremities, penis, scrotum and abdomen considerably swollen, body covered with large drops of cold sweat, could scarcely

speak for want of breath. Prescribed *Apocyn. can.* Better in two days, and continued to improve ever since, (which was last December,) is able to go to church now, although the disease of the heart with which he is affected will probably carry him off before long.

Several other cases of a similar and dissimilar character derived great benefit of this remedy. I did not note the symptoms of the cases clearly, but only mention them to confirm what has been written by several authors of the virtues of *Apocyn. can.* in curing dropsy. Whether it is homœopathic to dropsy, or carries the water off mechanically, I do not know, for we have but very few provings of this drug, and therefore, we use it only empirically, and necessarily in larger doses than any other drug of which we only have clinical data. The tincture used I purchased from Dr. Lodge, which is of dark brown color. Five years ago I had some from an eastern pharmacy which was of a gold yellow color, but which had no effect on dropsy. I usually give five drops in a teaspoonful of water every two hours.

TAPE WORM CURED.

BY B. L. DRESSER, M. D., SEARSPORT, ME.

Mrs. J. W., on Nov. 27, 1860, sent an urgent request to me, desiring me to visit her immediately. I found her suffering severely. Herself and friends thought her suffering arose from tape worm disease. But upon examination I found that her acute distress was principally medicinal; the patient having been previously treated with large and powerful doses of *Felix mas*, and other helminthic remedies, by an Allopathic physician. This patient had been governed by his care and diligently treated by him about three months.

When the treatment began, her health was as good as it had been during the last six years. She is now greatly emaciated, suffering violent inflammation of the uterus and its appendages; bowels have not had an action for nine successive days, they are also inflamed and tympanitic; extremely sensitive; pulse wiry, and beating one hundred thirty beats per minute; skin hot and dry; greatly agitated; fear of death, which had been made worse in the morning by her former physician having told her that she was at liberty to call whoever she desired, he having done all that he could do for her. Whereupon she sent for me, and I found her as above described. The above symptoms call for *Aconite*, which she got. It being also an helminthic remedy, made it a still greater blessing. We administered the remedy as follows: *Aconite tinc.*, one drop to a tumblerful of cold water; two teaspoonsful at a dose, once an hour. As the symptoms abated, lengthened the intervals between the doses. Upon visiting our patient the next morning, we found her a good deal better; the bowels had operated copiously twice during the night, the sensitiveness and tym-

panitic state of the belly had disappeared. The patient now got "Aconite 3," night and morning, for one week; then no medicine for two weeks, though we ordered sponge bathing every day, with our method of diet.

Having now got up a good tone of health and strength, we began the treatment, the object of which was to cure the Tape Worm disease. The symptoms from which to select a homœopathic remedy were very meagre and rather obscure. She experienced pain in the abdomen, colic, not very intense, itching about the anus, and also the nose; intermittent pain in the limbs, lassitude and nervous depression, constipation. Feeling in the abdomen as if alive; this symptom being very marked was the principal reason why I selected *Merc. vivus*, third potency, one dose night and morning. The third day following the patient experienced a good deal of uneasiness, colic, flatus, distress in the pit of the stomach, with great depression of spirits, urgent desire to go to stool. At this time she passed a piece of the worm about one yard in length.

The medicine was continued as before, though the symptoms were not, after the third day, so violent as at that time. The cure went on from day to day, the patient passing more or less of the worm at each evacuation, which took place once or twice each day, until at the end of three weeks, when the patient felt an uncontrollable desire to go to stool, whereupon she passed about three yards in length (this I preserved). The whole length of the monster, as near as we could judge, was about twenty-five feet. The head of the monster we could not discover, though it was sought for diligently. In our opinion this cure was successful, for I have never seen a more perfectly healthy looking person. Being naturally beautiful, the restoration of her health made her remarkably more handsome, which occasioned numerous comments in regard to her health by those who were acquainted with her. This patient remained in perfect health for more than a year, after that time we lost sight of her. This lady was about twenty-two years of age, a blonde, born and educated in the City of London.

SELF-INCISION FOR THE RELIEF OF STRICTURE OF THE URETHRA.
 BY T. T. PYLE, M. D.—A man aged sixty-five, who for twelve years had suffered from stricture of the urethra in consequence of injury received by a kick from a horse, was accustomed to relieve himself by the introduction of a catheter. On the evening of May 3rd, 1864, finding himself unable to do so, he got out of bed, and with a small penknife cut down to the seat of stricture at the under part of the urethra, or to use his own words, "felt where the stoppage was, and slit it up." I was called to see him on the following morning, and found that he had made a clean incision about an inch and a half in extent, to his immediate relief. I introduced a gum-elastic catheter, and drew the wound together by suture. The catheter was retained for three days, and at the end of the week the wound was completely healed. He was then able to pass his urine in a full stream, and has continued to do so since.

I have been induced to record this case owing to its peculiarity, from the man having performed the operation on himself. His expression to me was, that he was sorry he had not had pluck enough to do it earlier; the pain of the cut was nothing in comparison with the instantaneous relief to his urgent distress. I think it right to state that he was a sober man (quite sober at the time), and of more than ordinary intelligence.—*London Lancet*.

HOMŒOPATHY AND LIFE ASSURANCE.—The directors of the London Life Assurance office—the “General Provident”—at its recent meeting, have placed on record their opinion “that persons treated by the homœopathic system enjoy more robust health, are less frequently attacked by disease, and when attacked recover more rapidly than those treated by any other system; that with respect to the more fatal classes of disease, the mortality under homœopathy is small in comparison with that of allopathy; that there are diseases not curable at all under the latter system, which are perfectly curable under the former; finally, that the medicines prescribed by homœopaths do not injure the constitution, whereas those employed by allopaths not unfrequently entail the most serious, and in many instances fatal consequences.” The directors further propose to summon a meeting of the shareholders to lay before them the facts they have collected, and the decision to which they have arrived, namely, “to open a special section for persons treated by the homœopathic system, at a lower rate of premium than that charged on other lives.”—*London (Eng.) Observer*.

CIMICIFUGA RACEMOSA.—Dr. C. C. Smith reports to the “*American Homœopathist*,” a cure of a case of Pleurodynia with this remedy after failure with Arnica 3, and Bryonia 3.

CHOREA.—Dr. P. S. asks, “What are the most effective remedies in vehement chorea? Will some of our correspondents please reply?”

WATERS.—Moses H. Waters, M. D., has located at Peru, Miami county, Indiana.

Obituary.

GEO. W. BETTELEY, M. D., Professor of Materia Medica in the Cleveland Homœopathic College, died on the 11th of March, æt 42 years and three months. He has left a widow and two little boys to mourn his loss.

Mrs. B. proposes to publish Dr. Betteley's lectures, as delivered at the Cleveland College, Prof. Gatchell to revise them. We hope the profession will respond with subscriptions liberally and promptly.

Practice of Medicine.

ONE REMEDY AT A TIME.

BY A. J. SAWYER, M. D., MONROE, MICH.

A case in practice taken from my note book, and published to show the effects of single remedies, and the importance of single symptoms.

Rev. Mr. Y., aged forty-eight years, florid complexion, light hair, active, energetic, with a good deal of firmness. Taken sick in December, 1864, with what the doctors called typhoid fever, after watching with a son who died from the same disease. Was sick a long while and when he began to improve he improved very slowly. Ate heartily for a while, then lost his appetite almost entirely. Broke out with an eruption that covered his entire body, interspersed with boils. The eruption was attended with violent and almost intolerable itching.

Soon dropsy set in, extending to the thorax, which was very threatening, producing great dyspnœa and an almost incessant cough, both of which were much aggravated by lying down, consequently he had to be bolstered up in bed all the time. At the same time there was an erysipelatous inflammation of the right thigh on the inner and anterior aspect, extending nearly from the knee to the body, causing great suffering. Both of his legs were greatly distended, but the right especially so. Pulse 120 per minute and irregular. Appetite very poor, scarcely none. Tongue thick and pale but not much furred. Expectored with great difficulty a thick tenacious mucus sometimes mixed with blood. Comparatively free from pain except in that inflamed leg. Bowels torpid, only moved by enema. Urine high-colored and scant. He was *worse every fourth day towards evening*; fever, if any, *very slight, yet very thirsty*.

Such was his condition when I was called on the 2d of May, 1865. Prescribed Arsenicum alb. 4th, a dose every three hours until there

was an apparent improvement, (which would be manifested by an increase of urine, less dyspnœa and diminution of anasarca), then to omit and take *Sac. Lac.* Took Arsenicum three days, then omitted and took *Sac. Lac.* for three days. Ordered poultice of *ulmus fulva* to inflamed leg.

May 9th.—Dropsy disappearing rapidly. Able to lie down. "Like folks, and would feel quite like myself again but for my leg." (To use his own expression). Gave one dose of Arsenicum 4th, and left *Sac. Lac.* to be taken every three hours till I could see him again.

May 13.—Found him sitting up in chair and dressed. Breathing quite freely and dropsy still further diminished. Leg feels much better also, and appetite returning; but afflicted with an almost incessant cough, especially *when lying down and at night*, which prevented sleep. Ordered Pulsatilla 4th, a dose every three hours till an improvement (lessening of the cough) should take place, then to take *Sac. Lac.* so long as the improvement continued.

But before he took any of the above he had been taken into the dining room to dinner, (the first time he had been out of the room) and sat so that a cold east wind blew in upon him from an open window. Soon after (say about 2 o'clock p. m.) I was called and found him suffering with what appeared to be colic pains. As it did not seem to be severe and supposing it to be from indigestion, (not knowing anything of his going into the other room, &c.,) I ordered hot fomentations to the bowels and stomach, and left. But some three or four hours subsequently I was sent for in great haste, the messenger saying "the Elder was dying, &c., &."

When I arrived I found him in perfect agony, and as cold as a corpse, and covered with a cold clammy sweat. Pulse scarcely perceptible and wiry. He was in a half sitting posture, groaning frantically and shaking violently from head to foot. The pains were principally located in the *lower part of the bowels*, (hypogastrium) *between the umbilicus and pubes*, of a *pressing, squeezing character*, and *intolerable*.

I gave one dose of Colocynth 6th in water, and went to my office to see if I had made the proper selection. Found I had, and returned in a few minutes, and yet, although he thought the pain in bowels a little easier, he shook so he could but with great difficulty speak so that I could understand him. Waited about twenty minutes, and finding that although the pain was rapidly subsiding, yet the chill and shaking did not abate in the least. I then put five drops of the tinc-

ture of Gelseminum in a tumbler half full of water. Gave a teaspoonful. Ordered the dose repeated every twenty minutes till the chill began to abate, then to wait, and if fever followed to begin again and repeat every half hour till it began to abate, then stop ; giving nothing else until I came, unless he should be troubled with that cough, when they should give a dose of Pulsatilla and repeat half hourly till an improvement appeared, then to stop ; and I left for the night.

May 14, 9 A. M.—Found him sleeping soundly and sweating profusely. Had been sweating ever since taking the fourth dose of Gelseminum. Soon after the sweating appeared that incessant cough set in again, but one dose of Pulsatilla arrested it, since which time he had been sleeping soundly. Ordered them to give nothing till I could see him again.

6 o'clock P. M.—Found him in bed perfectly easy, but in a profuse perspiration which had never ceased during the day. He was lying down, breathing freely, and appeared to be surprised that he was really alive. He said no one must ever tell him there was nothing in homœopathic practice, or talk about coincidences ; for he had now *seen* and *felt* the proof of its efficacy. He had not taken that first dose ten minutes before he felt that terrible pain leaving. I ordered him to take nothing but Sac. Lac. unless that cough appeared again, when he was to take as before, Pulsatilla.

May 16.—Found him very comfortable but quite feeble, and complaining of a great tenderness in the bottom of his feet, the skin having peeled off during his long sickness. Has taken but one dose of medicine since I saw him, and that was this morning, for the cough (Pulsatilla) which arrested it immediately. Ordered to take no more medicine.

May 18.—Still improving. No medicine.

June 9.—Still improving. *No cough, no dropsy, good appetite, sleeps well*, riding and walking about, feels well.

For the American Homœopathic Observer.

HOMŒOPATHY IN CANADA.

Dr. Johnson very truly says, " that every science has its difficulties ;" and what is true of homœopathy is also true of every other new idea predestined to greatness. It will have to encounter opposition proportionate to the influence it is intended to exert upon society, or benefit mankind by uprooting some present existing evil. The greater the reform it is destined to work, the more violent and fierce will be the opposition. Thus it has been, that homœopathy, in

pressing her claims upon the attention of suffering humanity, has met and conquered her share of public and private animosity. The opprobrious epithets heaped upon the noble pioneers of our science in her youthful days, fall unheeded and harmless upon her exponents of the present time. Legal enactments, based upon justice to every medical sect, the respectability and increasing confidence and numbers of the admirers of the New School, form a protection for the younger members of the profession, which it is to be feared they do not fully appreciate

“But the friends and advocates of a new cause, in their zeal to serve it, sometimes deal the deadliest blows to its future progress.” Success has always attended its practice wherever it has been introduced, particularly in the United States and Germany, where almost from the beginning it received legal sanction. But in some other countries its fate has been somewhat different. A short time since a bill to legalize the practice of homœopathy was introduced into the Legislature of Australia, and defeated by a small majority. Similar attempts in Great Britain and other of its provinces have met a similar fate, and at present, Western Canada is the only portion of the empire wherein a homœopathic physician can collect, by a process of law, his regular charges for services rendered while practicing under a homœopathic diploma.

But even in Canada the field has been stoutly contested. Owing to the conservative element in the population being large, and decidedly slow to investigate the claims of anything *new*, homœopathy has had to contend with a more determined opposition than in many parts of the United States. And hence, those veterans who have fought in the front ranks of the contest and seen victory crown their labors, have reason to rejoice and feel proud of their efforts. But here the climax was only reached after she had won her way to popular favor by the comparative superiority of her treatment, and the bill placing homœopathy on a level with the time honored system of *Æsculapius* passed both houses of the Canadian Legislature and became the law of the land. Under this Act, a Board of Examiners was constituted (a part being elected annually by the practitioners resident in the Province) to examine candidates for degrees, reporting the same to the Governor, who grants a provincial license “to practice physic, surgery and midwifery in Upper Canada as they are taught and practiced by homœopathsists.” The Act says:—“The candidate must be twenty-one years of age, he must have followed medical studies uninterruptedly for not less than four years under the care of one

or more duly qualified medical practitioners, he must have attended at some University or Incorporated School of medicine, not less than two six months courses of Anatomy, Physiology, Surgery, Theory and Practice of Medicine, Midwifery, Chemistry, Materia Medica and Therapeutics respectively, and not less than one six months course of Clinical Medicine and Medical Jurisprudence respectively." Now I contend that the above law is sufficiently exacting in all its requirements to secure, (if legal enactments will do it) medical men well qualified to propagate the homœopathic doctrine, and do honor to the profession. But *some* of the members of the "Board," it appears, thought otherwise, for at the semi-annual meeting in July, 1863, the following By Law was passed: "That no candidate shall be admitted for examination by the "Board," who, after the publication of this By Law in the Canada Gazette, shall have practiced medicine in this Province for *hire, gain, or hope of reward*, without having the provincial license so to practice."

At present there is a greater demand in Canada for homœopathic practitioners than at any previous period in the history of this great reform, calling loudly upon every young man entering the medical profession, "to look before he leaps," and to earnestly devote himself to the acquisition of a thorough medical education, and he will be well repaid for his labor. But then, here comes this stumbling-block! An allopathic student, graduating in the United States colleges, after a three years study can come into Canada and commence practice until his four years are complete, when he obtains his Canadian license upon application, already securing a good location. But if the homœopathic student attempts a similar course, he *never can* obtain his Canadian license. Every young man entering our ranks has not the means to remain out of business the fourth year, and commence practice when his time expires, without entering some other occupation in the meantime to obtain a livelihood, in which he has not time to devote to his medical studies the requisite amount of reading to keep himself posted, to say nothing of the practical part of his profession.

The question arises, would he not be better prepared for all the duties of his profession by the study and practice he acquires in his fourth year, than by teaching school as many do, to obtain the means for commencing practice. I am happy to say that the majority of students entering the profession who make our best practitioners and take a first rank as medical men, are those who have to rely on their own individual efforts, and *work* their way to eminence and fame

The effects of the existing by-law is to drive some of our best students into practice in the States (where there are strong inducements I must confess) where, after they have built up a practice, they will be slow to give it up for the privilege of building another in Canada. I contend, that for the advancement and future benefit of homœopathy in the Province at the present, our policy should be a liberal one, and not the most strict possible to devise. That we should rather study what inducements can we offer young practitioners to make Canada their future home, instead of, what more rigid laws can we invent to subserve some personal pique, or secure some private aims. The homœopathic student, after a three years study is as well qualified to practice medicine in its various departments with much less danger to his patient, and far greater success than his allopathic brother can ever hope to attain, and yet he is prevented doing so. From the sublime to the ridiculous is but a step, and apparently we have taken it. We have been suddenly transformed from one extreme to the other, and I trust we will by and by regain our equilibrium ere it is too late.

VERITAS.

For American Homœopathic Observer.

CASE OF SCIRRHUS TUMOR.

REPORTED BY J. D. BUCK, M. D.

A case has lately come into my hands upon which there seems to be some diversity of opinion, and as it is quite probable that similar cases may have come to the notice of other practitioners of our school, I desire to report it for the benefit of their diagnosis, and should be glad to hear from others on the subject.

Mrs. H. æt 32, has been for many years, to use her own language, "troubled with her stomach," and was at one time under treatment for it in Germany. But I was not able to get any definite symptoms dating back more than a few months, that would seem to aid in the diagnosis. In Jan. last, she had a miscarriage while under the care of another physician. And again in the early part of May I was called to see her after she had been delivered of a two-month's foetus. She recovered readily from this "mishap," and some three weeks since I was again summoned. Found the patient in bed, and apparently near her end, as she had bidden her family farewell, and was *sure* she could live but a few moments. After quieting the fears of the really distressed family, I proceeded to make as careful an examination as possible.

Pulse very feeble, and at times intermittent, never running over

fifty per minute. Face flushed and anxious. Respiration difficult. Extremities cold, with a prickling sensation in the fore arms. There had been, for some time previous, entire loss of appetite, great thirst, with inability to bear more than a swallow or two of drink at a time. There was present a large amount of flatus, of which the patient relieved herself in considerable quantities. She complained of a severe *dragging* pain just behind the ensiform appendix of the sternum, and also pain, with a sensation of constriction in the left hypochondrium.

These last two symptoms had been present for some time, and have since continued with more or less severity; and she had had occasional vomiting of *slimy mucus*. Sometimes vomiting followed immediately after drinking, never of a dark color. She said she had a "*lump*" in her right side, which had been noticed for more than a year, but which she had not before mentioned to me, as she had shown it to several doctors who had told her it was "*nothing*," and would go away! Upon examination, I found in the right hypochondrium a hard, unyielding substance, apparently about three inches in diameter, and lying just beneath the peritoneum, moving to some extent *laterally* and *upward*, and when occupying its own position, resting just below the pylorus, never reaching quite as high as the gall bladder, or below the entrance of the ductus communis choledochus. There was no icterus, and the stools when passed appeared natural. The urine was natural also, as to both quantity and quality.

The paroxysm referred to, although the most severe, was neither the first nor the last of the kind, and in the present instance yielded in a few hours to Acon. and Nux 3.

Now it is evident that there is present a *tumor* of some kind. One Dr. called it an ovarian tumor, and another dropsy; but I can see nothing, either in symptom or locality, to support such opinions.

I have diagnosed a scirrhus tumor situated upon the duodenum, below, but interfering with the pylorus, and above the entrance of the duct c. c., and with this diagnosis I think we shall be able to account for all the symptoms.

First. The paroxysms referred to, are such as are frequently met with, and by some authors termed "Spasm of the pylorus." That the presence of the tumor should interfere with the action of the "valve," is very natural, and the symptoms which follow conclusive. Again, the pain referred to the sternal region, which is of a *dragging* character, may be owing to tension made upon the gastro-phrenic lig., and in the left hypochondrium to a like tension upon the gastro-splenic omentum, together with nervous irritation in the several

parts, I am led to diagnose scirrhus. First, from the general appearance of the patient. Although emaciation is not very great, there is a cadaverous, and earthy expression of countenance. The diagnosis is further supported by anorexia, thirst, the burning, shooting character of the pains, when referred to the gastric region; from the vomiting of mucus, or slime, and from the frequent seat of the disease in this locality. The prognosis in this case as in most others of the kind, is very unfavorable. Arsen. iod. 3d, was given, to be taken three times per day, but with very little encouragement as to the probable result. The case is not likely to go out of my hand, as the lady refuses to take other medicine than such as I have prescribed. Although she has at my request submitted to the examination of other physicians, I shall endeavor to obtain all the facts that may hereafter transpire; and should there be a fatal termination, endeavor to have a post mortem examination.

Sandusky, Ohio, June 27, 1865.

For the American Homœopathic Observer.

HYDRASTIS CANADENSIS.

BY H. WIGAND, M. D., DAYTON, O.

A married woman, aged 21; mother of one child, three years old; of nervous temperament, blue eyes, light hair; prolapsus uteri and leucorrhœa of several years standing,—took cold by getting her feet wet, during the last days of her monthly period (Nov. 1864).

Found her suffering from chills and high fever, pain in the bowels and uterine region, and frequent dysenteric evacuations. Gelsemium and Aconite removed these complaints, except the pains. These continued with increased severity. She says "It feels like wind." A lump, the size of a hen's egg, rises and falls in the right iliac and lumbar regions. Sharp pains around the umbilicus, extending to the left ovarian and splenal region. Moans continually, and at times her outcries are very distressing. Very restless; no sleep; abdominal walls painful to pressure; discharge of flatus, which sounds like the report of a pistol; tongue and lips parched and dry; little thirst; loathing of food; constipation; injections per anum followed by bullet-shaped fæces; offensive, pus-like discharge from vagina; great tenderness of os uteri; pale and haggard; hiccough; hectic fever; cold sweats; bed-sores. The latter symptoms developed themselves gradually during an illness of three weeks. Pains in the bowels and uterine region were constant. All the homœopathic remedies, appa-

rently, indicated, and appliances usually employed in similar cases, failed, in toto, to afford any permanent relief. Finally, I gave one-eighth of a grain of Morphine. This brought on violent spasmodic action and delirium, followed by restless sleep of several hours duration. Pains returned. She grew weaker; extremities icy-cold. Death seemed inevitable. Remembering that Eclectics employ Hydrastis as a tonic, and in order "*to do something*," I poured six to eight drops of the tincture in a glass of water, and ordered a dessert-spoonful every hour. (I had not perused Dr. Hale's work at this time.)

Called early next morning. No groans or outcries jarred my nerves at a distance from the house, as heretofore. Has she been raised to a higher plane of spiritual existence? No crape on the door-bell knob! Death-like stillness pervades the house. Is she just expiring? Noiselessly I enter her apartment, to be witness of a death-bed scene. Not so. She only sleepeth! The first natural sleep for three long weeks.

After the third or fourth dose, the pains ceased, and she fell asleep. Hydrastis was continued for four to five days. Appetite returned, bowels moved regularly, and she made a steady and speedy recovery.

The question arises in my mind: Could the same result have been attained by the 30th or 200th attenuation of Hydrastis?

GLEANINGS FROM ALLOPATHIC LITERATURE.

As physicians practicing homœopathically, we naturally look to the writings of our homœopathic colleagues for information as to the best mode of curing diseases; but we should not, therefore, neglect what goes on in the old school, as the practice of our allopathic brethren, revolutionized as it has been of late years by the indirect influence of homœopathy—will often give us serviceable hints in the treatment of disease. Indeed, some of the nominal partisans of Hippocratic physic tread so closely on the heels of the disciples of Hahnemann, that it is difficult to say, on first reading some of their recorded cases, which of the two schools the practitioner swears allegiance to—possibly close investigation would show that he does so to neither.

We avail ourselves of the last *Year Book* of the New Sydenham Society to cast a retrospective glance at some of the most interesting things that have been recorded in the allopathic literature of 1863.

CAUSES OF CONTINUED FEVERS.

Dr. C. Murchison remarks with regard to *Typhus*—1. Its tendency

to prevail in great epidemics; 2. It prevails most towards the end of winter and least towards the end of summer; 3. Destitution is its most powerful predisposing cause; 4. It is eminently contagious; 5. Defective ventilation and overcrowding, exercise a powerful influence on its production and propagation. *Relapsing Fever* is also an epidemic disease. Starvation seems to have most to do with its production. *Enteric Fever*, on the other hand, is an endemic disease. It prevails most in autumn. Its increase is favored by warm, but checked by cold and wet weather. It is slightly contagious. Emanations from sewage and certain forms of putrefying animal matter produce it. Dr. Murchison does not believe it to be caused by the presence of the stools of enteric patients in the sewage, and gives a number of facts and experiments in proof of this opinion.

PATHOGNOMONIC SIGNS OF TYPHOID FEVER.

MM. Primavera and Prudenti state that in typhoid fever the chlorides are absent from the urine. The phosphates and urates are also much diminished. When recovery commences, the phosphates are first rapidly increased, then the urates, and lastly the chlorides, by which time convalescence is established.

STATISTICS OF THE TREATMENT OF CONTINUED FEVER.

Dr. T. K. Chambers treated at St. Mary's Hospital in twelve years 230 cases of continued fever. Of these 109 were treated with neutral salines three or four times a day, small doses of Hydr. c. Creta once or twice a day at first, and afterwards bark, ammonia, and wine. The others were treated with liquid animal food every two hours, and a dose of dilute muriatic acid. Of the first group twenty one died; of the second three. The mean period of convalescence was shortened $2\frac{1}{2}$ days by the acid treatment.

SARRACENIA IN SMALLPOX.

C. J. Renshaw relates three cases of smallpox not confluent, apparently benefited by decoction of *Sarracenia*. One had not been vaccinated. No pitting in any.

Haldane gave the decoction to six patients, unmodified by vaccination, and saw no effect.

J. F. Marson tried it in fifteen cases. All died.

PITTING IN SMALLPOX.

F. Bowen practiced with success puncturing the vesicles, from the fifth to the seventh day with a needle dipped in a solution of Arg. Nitr. $\frac{1}{2}$ dram to Aq. 1 oz. In twenty-four hours the vesicles dried up, leaving no itching or unpleasantness.

MEASLES PRODUCED BY MOULDY FLAX-SEED MEAL.

Dr. Kennedy relates that a boy, æt. 15, in perfect health, had a quantity of mouldy flax-seed meal thrown on his face. It got into his eyes and probably down his throat. He was at once seized with smarting, and watering of eyes, running from nose, cough, and dyspnoea. His face soon became very much swollen, eyelids and eyes red, dyspnoea urgent. Great excitement of the system. The following day, except the rash, he appeared like a boy suffering a severe attack of measles. In a former number we mentioned the experience of Dr. Salisbury in the production of measles from the fungi in mouldy straw. Dr. Kennedy found similar fungi in the mouldy flax-seed meal.

SUBCUTANEOUS ADMINISTRATION OF QUININE IN AGUE.

W. J. Moore injects subcutaneously a solution of 30 grs. of Quinine to $\frac{1}{2}$ oz. of water and viij—x. minims of Acid Sulph. dil. He says 4 to 5 grs. administered in this way are equal in effect to 5 or 6 times that amount given by the stomach.

HÆMOSTATIC TREATMENT OF CHOLERA, &C.

T. S. Wise advises the application of the tourniquet in the cold stage of ague, choleraic collapse and similar states.

COBWEB IN FEVERS.

Dr. J. Donaldson tried cobweb in the intermittent, remittent, and continued fevers of India, and reports favorably. The dose is 5 grs. in pill, ter die, or oftener. It may be given as well during the paroxysms as the intermissions, and quickly relieves the almost insupportable headache and restlessness of an acute attack. It cured quartans and other inveterate fevers that had resisted the most heroic doses of quinine.

STATISTICS OF THE TREATMENT OF RHEUMATIC FEVER.

Of 26 cases treated by Dr. T. K. Chambers with 1 dram of Pot. Nitr., ter die, the mean stay in hospital was 40 days. Of 341 treated with bihoral doses of 1 scruple of Pot. Bicarb., the mean stay was 34.3 days. Of 33 treated with smaller doses of the same, 40 days. Of 11 treated without drugs, except an occasional dose of opium, 30 days. Of the 26 treated with Pot. Nitr., 5 were attacked with heart-disease, and 4 died. Of 174 treated with Pot. Bicarb., 9 had inflammation of the heart, and none died. Of 63 either bedded in sheets, or who had wilfully thrown off their blankets, 6 contracted newly pericarditis at least, if not endocarditis as well; 3 had a relapse of pericarditis on old cardiac disease; 5 had endocarditis alone (one from an accidental wetting); 1 a relapse of endocarditis on old cardiac disease. Not 4 per cent. had inflammation of the heart. That is to say, that bedding

in blankets reduces from 16 to 4 the risk run by patients in rheumatic fever.

Rheumatic fever is one of those diseases the treatment of which even a homœopathic practitioner would like to see improved. Though, as far as our experience goes, the mortality is small and the liability to cardiac inflammation slight under homœopathic treatment, still the disease is often extremely tedious, relapses are by no means unknown, and endo- and pericarditis occur too frequently. Hence, anything that will diminish these accidents must be welcome to any practitioner. The simple expedient of making the patient lie between the blankets in place of the sheets is not too insignificant to be despised by us. We have repeatedly seen the good effects of giving Bicarbonate of Potash in rheumatic fever, and now never hesitate to administer it in alternation with the indicated homœopathic remedy. Rheumatic fever seems to be just one of these diseases where it is advantageous to practice a little chemistry in addition to the specific treatment.

STRYCHNIA IN PALSY.

J. R. Reynolds relates a case of incipient wasting palsy cured by strychnia, $\frac{1}{30}$ th of a grain ter die. The patient, æt. 30, had fallen, on his head, when skating in the park, and some weeks afterwards suffered from impaired vision and dilation of pupil of left eye, and constant pain in head. These symptoms ceased, but nine or ten months after the accident the muscles of left arm and shoulder began to waste. The interrupted current improved the bulk and nutrition of the muscles without removing the paralysis.

MUTUAL ANTIDOTAL PROPERTIES OF NARCOTICS.

Brown-Sequard remarks that, in the treatment of meningitis or neuralgia, patients who cannot bear a double dose of belladonna or any other narcotic, will bear very well a full dose of two taken together. Perhaps it would be as well to give one of the medicines in a smaller dose.

CANNABIS INDICA IN TRISMUS.

Fraser records a case of trismus algidus resulting from exposure to wet and cold, so severe that the jaws could only be separated by considerable force. He gave Ext. Cann. Ind., commencing with $\frac{1}{4}$ gr., o. h., increasing the dose to gr. iiij o. h. In seven days 115 grains were taken. He improved gradually and made a good recovery. A similar attack he had had a year previously ceased spontaneously in three weeks.

TEST FOR ALCOHOLIC POISONING.

Piorry recommends the internal administration of ammonia as a

touchstone in all cases of severe nervous disorders occurring in an individual given to alcoholic excess. If the symptoms are owing to the alcohol, they are dissipated under the use of ammonia with remarkable rapidity; if they persist, their cause must be sought elsewhere. Liq. Ammoniaë he considers a certain cure for all symptoms caused by the abuse of alcohol.

ARSENIC IN PHTHISIS.

A. Leared records 9 cases in which he tried this remedy; 4 with cough and expectoration; 3 were improved, pains of chest removed in 1, night sweats averted in 2, flushing of face much relieved in 1, appetite greatly increased in 1.

The same practitioner speaks highly of the hot-air bath in phthisis.

ACETATE OF LEAD IN PNEUMONIA.

Lendet gave it in 40 cases (31 males, 9 females) of whom 3 died. In all but one the disease was unilateral. Mean age, 36½ years. Duration of the use of the medicine from 1 to 15 days, average 6. Total quantity administered from 7 to 80 grains, average 40 grains. No sign of poisoning was produced, nor any blue line; no constipation; in half the cases, diarrhœa. On the pulse the effect was to diminish the number of pulsations from 100 or 120 to 70, 60, and even 50 or 40 on the 4th day of treatment. Convalescence was rapid.

A NEGATIVE DOCTOR.

Skoda believes we can have *no* certainty as to whether pneumonia is commencing. He has *no* faith in the possibility of arresting it at an early stage. When the disease has declared itself we have *no* sure guide in each case to a successful treatment. He finds that abstinence from blood-letting does *not* now give a favorable rate of mortality (whatever it may have done under Dietl some years ago). The epidemic tendency has *nothing* to do with the fatality of it. Treatment exerts *no* remarkable influence on the mortality on a large scale. There is *no* specific for pneumonia. Tartar emetic affords *no* relief unless it causes vomiting or diarrhœa. Calomel is *not* advisable. Digitalis has produced *no* good results. Nitre and similar salts have *no* influence on pneumonia. The kind of treatment employed has *no* influence over consecutive diseases, especially tuberculosis.

The affirmations to set against these negatives are quite insignificant. Opium is useful as a palliative in those patients who bear it well. Quinine is good for pneumonia associated with intermittent fever, and also in dyspnœa when the action of the heart is irregular, rapid, and ineffectual, owing to exhaustion of nerve-power. Inhalation of ether and chloroform affords momentary relief. Warm appli.

cations give relief except when there is great force and oppression, when they cause distress. Cold applications are very useful in traumatic pneumonia. Cold to the head and cold sponging are beneficial.

PARACENTESIS THORACIS.

Dr. H. J. Bowditch (*American Quart. Jour. of the Med. Sc.*, Jan., 1863) gives a resume of his experiments for twelve years, with the results of 160 operations on 75 persons. He has never seen the least *permanent* evil resulting from any operation, and only the slightest *temporary* difficulties, such as pain, slight dyspnoea, cough, &c.

MALE-FERN OIL IN TÆNIA.

Ogle gives 24 cases in which this drug caused the death and expulsion of long lengths of the worm, in two instances twenty-four and thirty yards. The patients' ages varied from $4\frac{1}{2}$ to 57 years. The head was never expelled, or at least not found. He considers it a better vermifuge for this parasite than Kamela, Kousso, Rottleria tinctoria or Santonine, all of which he has tried.

A LARGE DOSE OF OPIUM.

A gentleman received a pistol bullet in his last lumbar vertebra, where it lodged eighteen years. On the third night his agony was so intense that the bedstead trembled with his body; he breathed and spoke through his teeth, and perspired so as to wet through a hair mattress. At 8 P. M. he got forty drops of Tinct. Opii; at 9, 2 drams; at 9:44, 3 drams; at 10:30, 1 oz.; at 12, $\frac{1}{2}$ oz.; between 3 and 4 A. M., $\frac{1}{2}$ oz.; in all, $21\frac{1}{2}$ ounces, when relief was obtained. He had previously been freely bled.

ONANISM.

Hilton cures this practice by freely blistering the penis, in order to make it so raw and sore that it cannot be touched without pain.

URETHRAL FEVER.

This term is applied by E. Marx to the aguish fever that occurs in many individuals after operations on the urethra; even such slight operations as the introduction of a bougie. The fever varies from a slight ague to what the author calls a fulminating attack that rapidly kills the patient. Ricord, who for a long time denied the value of sulphate of quinine in urethral fever, now administers it as a preventive in all cases where he is about to perform an operation on the urethra. He gives it for four or five days before the operation, to the amount of six or seven grains daily. Long recommends the tincture of Aconite for this fever—we suppose he got his idea from some member of our school. In serious cases of the fever, Marx advises eight grains of quinine to be swallowed immediately after an attack, and

the same dose to be given *per anum*. If the attacks recur, larger doses should be given by enema.

POLYPUS OF THE UTERUS.

McClintock says this disease is rarely met with, before the age of thirty. Of 34 cases, the youngest was twenty-five, the oldest sixty. Their general structure was fibrous or fibro-sarcomatous. The particular structure did not appear to influence the hæmorrhage or other symptoms of a polypus. The fibrous or muscular generally rises from the fundus; the sarcomatous from the upper part of the cervix or lower part of the body; the gelatinous and vascular from the lower part of the cervix. Besides the leading symptom—irregular hæmorrhage—sickness of stomach is often present. The surface of a benign polypus varies in color from pale pink to purple; it is smooth to the touch. He strongly insists on the removal of the polypus by torsion, or excision by knife, scissors, or ecraseur, in preference to ligature. Of 34 cases noted by the author, 3 died; all of them had been operated by ligature. Of 59 cases of ligature reported by R. Lee, nine proved fatal, while out of 35 operated by excision or torsion, none died.

OVARIOTOMY.

G. Hewitt gives the following statistics of this operation up to September, 1863:

Operator.	Number of Operations.	Cures.	Deaths.
B. Brown,.....	58.....	32.....	26
Bryant,.....	10.....	6.....	4
Clay.....	107.....	73.....	34
J. Hutchinson,.....	7.....	4.....	3
Lane,.....	11.....	8.....	3
T. Smith,.....	19.....	15.....	4
S. Wells,.....	74.....	49.....	25

DYSMENORRHOEA.

Greenhalgh finds obstinate cases readily yield to division of the os and cervix uteri by the bilateral metrotome. Of 23 cases so operated on, 18 benefited considerably; 20 were married, 3 single. Of the married, 5 had children, but had been sterile from four to eleven years; 3 have since become pregnant.

PATHOGENETIC EFFECTS OF SULPHURIC ACID.

In several cases of poisoning by this substance, a marked symptom was intercostal neuralgia. In one case it was observed from the sixth to the tenth ribs on the right side, on the third day. In another it occurred in the same place in the fourth week. In another case it was bilateral, afterwards affected the lumbar nerves, also was accompanied by hyperæsthesia and gradually followed by extreme sensitiveness of the whole body.

POISONING BY PHOSPHORUS.

Numerous cases have been recorded in the journals, showing the resemblance to acute atrophy of the liver, and the rapid occurrence of fatty degeneration of almost all parts of the body. In one case the brain was found in a state of fatty degeneration. In a case of phosphorus poisoning in a girl of thirteen, fat was found in the liver, kidneys, lungs, the muscular fibres of the intestines, the muscles of the heart and the abdominal muscles. A man aged twenty-five swallowed the substance scraped off three packets of phosphorus matches. Vomiting came on after six hours, and was repeated ten or twelve times. After twelve hours he complained of headache, anorexia and thirst, and slight burning down œsophagus to stomach. The throat was red and the stomach tender. On the third day jaundice appeared, with tenderness of hypochondrium and slight enlargement of liver. On the fourth day and afterwards there was blood in the fæces. On the sixth day albumen was found in the urine; biliphæin and uro-erythrin were also present, and the phosphates were in excess. On the seventh day somnolence with incoherent speech. Tongue black and dry, skin hot, at night delirious, requiring restraint. Next morning unconscious, pulse 132, breathing slow. Tonic cramps in legs; later, spasms of arms and trismus; he died convulsed, 190 hours after taking the poison.

Post-mortem appearances.—Extravasation of blood in the connective tissue of neck and mediastinum; ecchymosis of base of heart. Liver small, withered; acini made up of fat globules of different sizes; few hepatic cells still visible. Spleen unaltered in size, elongated in form; some of its elements converted into aggregates of fatty globules and fatty molecules found clinging to the trabeculæ. Alimentary canal containing a tarry fluid in its upper part. Numerous hæmorrhagic erosions in the pyloric extremity of the stomach. Cortical substance of kidneys swollen, uriniferous tubules filled with fat-granules.

A girl, æt. 25, swallowed the paste from sixty phosphorus matches. She died at the end of seventy-seven hours, with symptoms of irritant poisoning and convulsions, no jaundice. Ecchymoses were found beneath pericardium, in sub-pleural tissue and mediastinum. Liver of normal size, but far gone in fatty degeneration, no cells being visible in a thin section. Cortical substance of kidneys filled with fat-granules; also, though to a less degree, in the pyramids.

A woman died six days after eating a salad in which a packet of matches had lain an hour. She had an icteric tint of skin. The cells

at the periphery of the hepatic tubules were loaded with fat. Kidneys slightly affected, the heart very fatty. Fat in muscular fibres of tongue.

Maukopff remarks that the hepatic affection produced by phosphorus ought not to be called a fatty disease, but an acute, diffused, parenchymatous inflammation. It exactly resembles acute yellow atrophy. —*British Journal of Homœopathy*.

Probing.

HAMAMELIS VIRGINICA.

BY WM. H. BURT, M. D., OF LYONS, IOWA.

My temperament is sanguine-nervous; weight, 148 lbs.; am in perfect health; tongue clean; good appetite; bowels move once a day.

Sept. 16th, 1864—9 A. M. Took half an ounce of the 10th dilution, prepared in water. 10 A. M., great fullness of the forehead, with a pressing distress in the roots of the tongue; distress in the umbilicus; dull, aching pain in the sacrum and hips, quite severe when walking. The fullness in the forehead and the pain in the hips were the first two symptoms. These symptoms lasted all day, with the addition of a great dryness and burning feeling of the palms of the hands. The pain in the lumbar region was very severe all day.

17th. Had a restless night; my whole body felt very dry and hot; sexual dream, with an emission, followed by great weariness and severe dull pain in the loins; fingers stiff, with sharp sticking pains in the first joint of the right index finger; soft stool. 7 A. M., took one ounce. 9 P. M. Fullness of the forehead and sharp pains in the temples all day, of a severe character, with a pressing sensation in the pharynx; back and legs ached severely all day; very gloomy and sad, probably caused by the nocturnal emission; ate some plums for supper—they soured on my stomach, and I had to vomit them up at midnight; consequently took no more notes of the symptoms.

19th. Feeling well. 4 P. M., took 50 drops of the 3d dilution. 9 P. M. For the last four hours have had slight frontal headache, with a constant burning distress in the lower part of the epigastrium and umbilicus; desire for stool, but cannot accomplish it with the greatest effort; for one hour have had severe drawing pains in both testicles; rheumatic pains in the legs; hands hot and dry.

20th. Slept well; had a sexual dream, but no emission; right wrist

and fingers stiff; dull pains in the lumbar region. 6 P. M., took half an ounce, prepared in water. 9 P. M., slight headache, with severe distress in the pyloric portion of the stomach and umbilical region; dull, aching pains in both testicles; dull pain in the lumbar region.

21st. Slept well; dull headache; slight distress in the bowels; dull pain in the lumbar region; hands and fingers ache, and are quite stiff; stool natural consistence, but covered with mucus. 11 A. M., took half an ounce. 8 P. M. Have all of the above symptoms, with a dull, pressive distress in the pharynx, and roughness of the fauces; dull pains in the right hypochondrium; the flexor muscles of the right arm have constant, very severe, dull drawing pains in them; dull pains in the feet and toes.

22d. Slept well; had a sexual dream, with an emission; soft stool, at 6 A. M., covered with slimy mucus, with distress in the bowels; very severe back-ache; hands hot and dry; 10 A. M., took half an ounce. 9 P. M. All day feeling as if something had lodged in the fauces, which produced a constant inclination to swallow; dryness of the fauces; slight pain in the bowels; *very severe back-ache*—without a doubt, it was caused by the emission; hands hot and dry; very gloomy; no disposition to move.

23d. Had a restless night; my throat was very dry all night, with a feeling as if something large had lodged there; compelled to swallow every few minutes, which produced dull pains in the tonsils; very painful when swallowing food; the fauces are very much congested, and the tonsils slightly swollen; natural stool; severe back-ache. 9 A. M., took half an ounce. 9 P. M. Tongue has two blisters on the right side; they are very troublesome. My throat has been very painful to-day; sharp pains in the stomach; drawing pains in the groins, passing down to the testicles; drawing pains in hands, legs and feet. Took half an ounce.

24th. Slept well; very languid; skin hot and dry; flat, rough taste; blisters on both sides of my tongue, which are very troublesome; severe congestion of the fauces and tonsils; deglutition is very painful; a number of times, through the day, had severe dull pains in the testicles, with distress in the bowels; hands hot; very gloomy.

25th. Slept well; throat feeling better; natural stool, with distress in the umbilicus; all day had frequent dull pains in the testicles; frequent inclination to urinate; constant back-ache.

26th. The tonsils and fauces are still congested, but do not pain me any; the tongue is well. Last night had a profuse cold perspira-

tion all over the scrotum, but not of the body. Had a number of rheumatic symptoms, through the day, of the arms and legs.

October 3d. Feeling well.

March 6th. I commenced a proving of the fluid extract. Continued it four days, when I was compelled to stop the proving, it producing such excruciating pains in the testicles. I commenced with 10 drops a day, and increased it to 50 drops. The symptoms were the same as in the first proving, but more strongly marked.

CHARACTERISTIC PECULIARITIES.—The pains are worse when still; relieved by motion. The pains in the testicles are worse after midnight, until morning.

Sleep.—Great restlessness all night; whole body is dry and hot. Awoke at 3 A. M., with severe neuralgic pains in the testicles; could not sleep any more, the pain being so severe and constant; my throat was so sore that I could not sleep; sexual dreams, with emissions; in the morning feeling as if I had not slept.

Head.—Feeling of fullness of the head, with dull frontal headache; fullness of the forehead, with a pressing sensation in the roots of the tongue; sharp pains in the temples. The headache caused by the Hamamelis is of a very slight character; most of the time the head was not affected.

Mouth.—Flat, rough taste in the mouth; tongue coated white; blisters on the sides of the tongue.

Throat.—Roughness of the fauces; feeling as if something had lodged in the fauces that causes a constant inclination to swallow; deglutition is quite painful; dryness of the fauces; the tonsils and fauces are greatly congested.

Stomach.—Distress in the stomach; sharp pains in the stomach, with distress in the umbilical region; nausea from pain in the testicles.

Bowels.—Distress in the umbilicus (constant symptom); sharp pains in the umbilicus; burning in the epigastrium and umbilicus; rumbling in the bowels, with cutting pains; drawing pains in the abdominal muscles.

Stool.—Natural stools; natural stools covered with mucus; mushy stools; constipation for two days, then hard, dry, dark-colored stools; great desire for stool, without being able to accomplish it.

Liver.—Retention of bile. The bile that is secreted is of a vitiated character, shown by the hard, dark-colored, dry stools. The dry stools are also due to the suppression of the intestinal secretions.

Dull pains in the right and left hypochondriac regions; sharp pains in the left hypochondrium, in the region of the spleen.

Urinary Organs.—Frequent inclination to urinate. The Hamamelis has no special effect upon the kidneys.

Organs of Generation of Men.—The great field of action of the Hamamelis is on the organs of generation of man and woman, on the venous system, and in a few cases of rheumatism. In genuine rheumatism, in my opinion, it would disappoint us; but if the generative organs were affected, and the patient was of a rheumatic diathesis, it would be a stronger indication for the Hamamelis. Sexual dreams, with emissions, followed by great lassitude, and a gloomy, desponding mood, with severe dull pain in the lumbar region, from small doses. Large doses of the tincture cause great prostration of the animal passions, with severe neuralgic pains in the testicles, of a dull, drawing character, which change suddenly to the bowels and stomach, producing nausea and great faintness. This symptom was so severe that I was compelled to stop the proving. I awoke at 3 A. M. with this great distress—could not sleep any more; for four hours I never suffered more acutely—no position would relieve me. The pain would be a few minutes in the testicles, and then in a few moments it would all appear in my stomach. About this time the weather changed from cold to warm, rainy weather. Drawing pains in the testicles, day and night, but more in the night, from the dilutions; drawing pains in the groins, passing down to the testicles; profuse cold sweat of the scrotum at night.

CLINICAL REMARKS.—I have never used it in diseases of the testicles, but in ovarian diseases I have given it with the most pleasing results. I will cite a few cases from my note-book.

CASE 1. Mrs. G., æt. 30; bilious-lymphatic temperament; nursing a babe. For the last two months has had paroxysms of pain in her right groin, from six to twenty times a day. The pain commences in the region of the right ovary, and passes down the broad ligament to the uterus. She says it is just like the pains of labor, but commences in the wrong place. There is a swelling in the right groin, half as large as a hen's egg, and is very tender on pressure; a good deal of pain in the epigastrium and lumbar region; no appetite; tongue furred white; quite weak; keeps her bed most of the time; bowels costive; chlorotic look. Gave Hamamelis 1st, twenty drops in a tumbler of water—a dessert-spoonful every four hours. Called again in three days, and found my patient at work. Immediately after taking the medicine she commenced to improve, and has continued to do so

ever since. She has pain two or three times a day now, but not near so severe as it was at first; can bear quite hard pressure over the tumor; pain in the stomach is all gone; good appetite. Continued the *Hamamelis* two weeks, when the tumor was all gone, and she was discharged cured.

CASE 2. Miss N., æt. 19; nervous hysterical temperament.

“ Aug. 20th. For the last week has been compelled to keep her bed; has had severe paroxysms of pain night and day, but more in the afternoon and fore part of the night. The pain commences in the region of the left ovary, and passes down to the uterus; has pains every fifteen and twenty minutes. The pains are of a cutting, tearing character, and are so hard that she cries with them. I cannot discover any enlargement of the ovary; cannot bear to have her bowels touched; has not had her menses for six weeks; has a constant leucorrhœa; the mammary glands are very tender, and frequently have sharp pains in them; constant pain in the back of the head; no appetite; bowels costive; extremely nervous; does not sleep any at night; very pale. There is no doubt that she is an onanist. Gave *Caulophylline* 2d, every two hours.

21st. Slept some, and is feeling a little better. Continued same remedy.

22d. Had a very bad night, and is feeling worse to-day. Gave *Bell.* and *Nux-V.*

23d. Feeling some better, but still suffering severely. Gave *Macrotine* 2d.

25th. Sent for in great haste. The patient is very much worse; had a hard day, yesterday; slept none last night; extremely nervous. Gave *Hamamelis*, twenty drops of the tincture in a tumbler of water—a dessert-spoonful every half hour, until relieved, and then every two hours. After the third dose she commenced to get easy, and slept about four hours through the night; feeling quite easy to-day, but the pains have not entirely ceased.

Continued the *Hamamelis* three days, when the patient was discharged convalescent, every symptom having been removed but the leucorrhœa, which she did not care to be treated for. This is a very interesting and instructive case.

CASE 3. Mrs. B., æt. 37; bilious temperament; nursing a babe. For the last three months has been gradually losing her strength; looks very pale and anæmic. For a long time has had frequent paroxysms of pain in the region of the left ovary, passing down to the uterus. The pains (to use her own language) “are just like they were

when I was confined." Some days there is a large swelling in the right groin, which is very tender when pressed upon; then there are days when she can notice no enlargement. Has a very poor appetite; can just keep up; is very weak; fears she will be compelled to wean the babe, which is six months old; bowels are costive. Gave *Puls.* one week. The first two days it gave great relief; after that, did no good. The paroxysms of pain come on every two and three hours, and are worse in the evening. Gave *Hamamelis*. The pains gradually became less for three days, when they were all gone. I continued it for three days longer. She had no return of the pain, but rapidly gained her strength without any more medicine. This was a case of ovarian irritation, and it was a pleasing cure.

In passive uterine hemorrhage I have given the *Hamamelis* with good results, but in active uterine hemorrhage I have given it a number of times, and never received any benefit from it.

Larynx.—Tickling in the larynx, with a constant inclination to cough; pressing sensation in the larynx; slight hacking cough. I have given the *Hamamelis* a great number of times in Hæmoptysis, with the most satisfactory results. It is my main remedy in these cases.

Back.—Dull, dragging pains in the lumbar region; severe back-ache all day, after an emission; dull pains in the sacrum and hips.

Arms.—Severe drawing pains in the flexor muscles; dull pains in the elbow joint (right); drawing pains in the wrists, hands and fingers; stiffness in the hands and fingers; palms of the hands are hot and dry.

Legs.—Dull, drawing pains in the legs; weakness of the knees; dull, heavy, drawing pains in the feet and toes.

Miscellany.

A London Life Assurance Office Converted to Homœopathy by the Evidence of Statistics.

The month of December, 1864, marks an epoch in the history of homœopathy, the memory of which will be ardently cherished by every homœopath of the present generation; whilst, to this period will frequent reference hereafter be made, as that from which is to be dated a remarkably rapid growth of the system in public estimation.

On the 16th of December, 1864, there met together at the Freemasons' Hall, in London, under the presidency of Lord Henry Gordon,

a number of individuals—in no respect identified with homœopathy, but simply concerned in the promotion of their own pecuniary interests—to consider the bearing of this system of medical treatment on the health and life of the community. The parties referred to are the Directors and Shareholders of a company, entitled “The General Provident Assurance Company.” The object of such institutions is, we need hardly remark, commercial gain; and one of the principal means employed is an investigation, conducted with scientific severity, into the duration of human life, with all the concomitant circumstances which tend to affect the health of individuals and classes.

Hitherto the actuaries of these valuable institutions have disregarded—and therefore omitted from their calculations—the very important consideration of *medical treatment*. The keenness of competition, however, which characterises every department of trade in the present day, and stimulates to their utmost extent the intellectual faculties of our men of business, has, at length, made itself felt, even amongst these very conservative establishments; and, as a consequence, we find, in the case of the general Provident Assurance Company, the actuary directed to make an investigation into the hitherto unexplored region of *comparative medical treatment*—with what result it is scarcely necessary to inform the readers of this Journal.

To *some*, at least, of the Directors of the Provident, this result, no doubt, presented itself in the light of a discovery; to *none* could it be otherwise than gratifying to learn that their labor had been rewarded by the acquisition of data capable of being turned to very profitable account, in the following well-ascertained facts:—that persons treated by the homœopathic system enjoy more robust health, are less frequently attacked by diseases, and when attacked, recover more rapidly than those treated by any other system; that with respect to the more fatal classes of disease, the mortality under homœopathy is *small* in comparison with that of allopathy; that there are diseases *not curable at all*, under the latter system, which are *perfectly curable* under the former; finally, that the medicines prescribed by homœopaths do not injure the constitution, whereas those employed by allopaths, not unfrequently entail the most serious, and, in many instances, fatal consequences.

These data obtained, the Directors had but one duty to perform alike to themselves and to their constituents, which was to summon a meeting of their shareholders, and to lay before them the facts they had collected, and the decision at which they had arrived, viz., “to open a special section for persons treated by the homœopathic system,

at a LOWER RATE OF PREMIUM THAN THAT CHARGED ON OTHER LIVES." And without a dissentient voice this proposition of their Directors was adopted by the share-holders of the General Provident Assurance Company.

Here, then, we have a testimony borne to the great practical value of Homœopathy which nothing can gainsay—against which ridicule and abuse, the only weapons by which we have hitherto been attacked, can avail nothing. It is not with "individual opinion" that our opponents have *now* to deal—not even with the opinions of such men as the late Archbishop of Dublin, the late Dr. Gregory, Professor of Chemistry in the University of Edinburgh, or the late Dr. Samuel Brown, a man worthy to rank with the illustrious Faraday—all of whom lived and died in the faith of the truth of Homœopathy—and not to mention a host of other names of men, living and dead, in every department of literature, science and art. It is not with *individual opinion*, we repeat, that our opponents have *now* to deal. They are *now* confronted with the result of an investigation directed to be made by a body of commercial men, for commercial purposes, conducted with that marvellous precision which has exalted the investigations of the assurance offices of this country to the rank of scientific verities—and endorsed by men whose intellectual faculties, when summoned to decide, must have been in liveliest exercise, seeing that they had to determine on a question in which they were without precedent for a guide, and in which their own pecuniary interests were deeply concerned. Well, the question *has been* decided, so far at least as *one* Assurance Office, with its Actuary, Directors and Shareholders is concerned; and the fact cannot be concealed. It will not be long, therefore, we may confidently predict, before other offices will follow this example. But, however numerous may hereafter become the adopters of this innovation, let it ever be remembered that to the General Provident Assurance Company belongs the distinguished honor of being the pioneer in this movement. And never let the circumstance be forgotten, which gives life and vigor to the great moral of this narrative, that the decision arrived at was the result of an investigation suggested by an observation of the ever increasing conquests of homœopathy, especially amongst the highest and best educated classes of society, but cropping out everywhere throughout the world in spite of the adamantine rocks of ancient prejudice, and the alluvial deposits of social and professional influence—and *thereby* forcing itself upon the attention of intellectual men of business, whose avocation it is to avail themselves of every legitimate opening for the

augmentation of their revenues, and the elevation in public estimation of that branch of industry with which they may happen to be connected.—*British Journal of Homœopathy*.

A FREAK OF NATURE.

BY C. D. WILLIAMS, M. D., ST. PAUL, MINN.

DR. E. A. LODGE:—In compliance with your published request, that your professional readers of the *OBSERVER* would communicate anything new or useful, I take the liberty of presenting a fact, new to me, as, from the nature of the case, it must be to others. I am not aware that any practical advantages can be derived from its publication; nevertheless, as a curious departure from nature, is not altogether devoid of professional interest. A gentleman called on me to make a stethoscopic examination of his lungs. Not because he realized, or even suspected tuberculosis, or other diseases of these organs, but for other purposes.

I began my explorations of the chest, on the left side, and on reaching the region of the heart, found to my great surprise, that this organ was entirely wanting, or gone; but in its place, one of the lobes of the lung corresponding to that always found on the right side. I mean the second or middle lobe. The sounds heard throughout all three of the lobes on this side were normal, but rather weak. My attention was then turned to the right side of the chest, where I found the heart situated, directly under the nipple of that side, performing its functions in the most perfect manner. This was a new feature in my experience, it being a freak of nature I do not remember having seen mentioned in either the books or journals, therefore thought it a case worthy of publicity. It may be well to mention, at this time, that the general configuration of this gentleman is perfect and his health good.

Societies.

For American Homœopathic Observer.

CONCERNING THE AMERICAN INSTITUTE.

DEAR OBSERVER:—This National Association held its Eighteenth Annual Meeting in the Queen City of the West, from whence this writing. It convened in Melodeon Hall, one of the hottest and most noisy in the city, yesterday morning, at 10 o'clock.

As is usual, those first on the ground secured the offices and got the glory which official position gives. No more able and efficient President, however, could have been selected than the incumbent Dr. S. S. Guy, of Brooklyn, N. Y. The Vice President was the courteous and competent Dr. Talbot of Boston, Mass. The provisional Secretary was well selected, and as a consequence, the proceedings of the meeting were taken down with that truthfulness characteristic of Dr. Helmuth. The Secretary and Treasurer will doubtless fill their stations with proper dignity. The Board of Censors, composed of Drs. Swazey, Witherill, Drake and Erhmann will see that no unworthy person gains membership. These officers acted during the session this year, and hold over to the next meeting.

The following delegates from auxiliary bodies, presented credentials, and such as were not members were invited to seats with the Institute, and to participate in its deliberations :

Wm. T. Helmuth, M. D., T. P. Wilson, M. D., and E. M. Hale, M. D., as delegates from the Western Institute of Homœopathy.

O. D. Hamilton, M. D., as delegate from the New York State Society.

B. De Gersdorff, M. D., J. H. Pulte, M. D., and E. Kneipcke, M. D., as delegates from the German National Society.

E. M. Hale, M. D., E. Kneipcke, M. D., and G. D. Beebe, M. D., as delegates from the Illinois State Society.

T. P. Wilson, M. D., as delegate from the Cleveland Homœopathic College.

I. T. Talbot, M. D., presented a plan for re-organization of the Institute, and alluded in appropriate terms to the causes which have interrupted the meetings of the association, and to the services of those who had shared the hardships of the field, during the terrible struggle through which the nation has passed, and to the memory of those who have passed to the spirit world since the last meeting of the Institute. The plan of organization was referred to a committee, with instructions to report to-morrow morning.

Dr. Swazey offered the following :

Resolved, That this Association invite other kindred organizations to send delegates to the American Institute.

This last Resolution was finally passed, after some factious opposition from two members.

The old question as to the propriety of instituting provings with the high potencies, came up as usual, and was discussed with earnest

ness by both parties ; for two parties there always will be to this vexed question.

The excellent report from the Massachusetts Homœopathic Society was presented by Dr. Talbot, accompanied by a very able and critical paper by Dr. H. L. Chase, read before that body, and relating to the subject of Homœopathic Pharmacology. During the discussion of this paper occurred one of those scenes which are disgraceful to any scientific body—namely, personal attacks. The subject of the discussion was the abuses practiced upon the profession by certain persons and firms, pretending to sell homœopathic medicines. Dr. Beebe, of Chicago, took this opportunity of going outside the dignified discussion which was going on, and with warlike ferocity attacked the Pharmacies of the West, and particularly that of Mr. Halsey, of Chicago. He alleged that the medicines sold at that Pharmacy were many of them procured at botanic drug-shops, which certainly would be very reprehensible ; also, that he once asked for the 6th dilution of Belladonna and was handed the 3d. He alleges that upon handing it back, the proprietor took off the label and replaced it by one bearing the notation of 6th ! which operation was done “ before the face and eyes ” of the accuser.

This allegation might be believed, could we imagine a man so insane and foolish as to be guilty of such an action. It is not usually the practice of swindlers to perform their little operations before the eyes of their victims.

Dr. Beebe once conducted a Pharmacy, which died of marasmus, after a short existence.

Dr. Smith, of Chicago, substantiated Dr. Beebe's statements, and added, as a clincher, that Mr. Halsey had sent him the 30th of a remedy, which 30th dilution “ had color to it ! ”

Now, as Dr. Smith happens to be Professor of Materia Medica in Hahnemann Medical College at Chicago, and delivered no less than twelve or fourteen lectures on that subject in one Winter, he ought to know just how the 30th dilution of a remedy ought to look. At any rate, we cannot but admire the wonderful acuteness of the Doctor's visual sense.

Dr. F. Woodruff, of Michigan, defended Mr. Halsey, saying that in all his dealings with him he found only one mistake. He said he once received what purported to be Mercurius, 3d trit., but was nothing but Sugar of Milk. It is a pity that we are not all blessed with such delicate perceptions.

Dr. Hale found fault with much of the alcohol used in preparing

homœopathic dilutions. He alleged that nearly all of it contained *fusel oil*. He asked the question—If any member could tell the exact kind of alcohol used by Hahnemann in his practice? To this query no reply was given. If Hahnemann's alcohol contained *fusel oil*, we may as well go on using such alcohol; if not, *not*.

Dr. Ludlum objected to this indiscriminate onslaught on the Pharmacies. He defended Mr. Halsey, in a courteous speech, and said that ten years' acquaintance led him to consider Mr. H. a conscientious pharmacist and a christian gentleman.

Dr. Krebs, of Boston, and some others, did not have any confidence in the Pharmacies; they prepared their own medicines. Dr. DeGersdof advised the establishment of a great Central Pharmacy, to be under the supervision of the American Institute, and that all Pharmacies should be obliged to purchase of this central establishment. This utopian idea can never be realized, especially among American people, who do not allow their commercial matters to be under the restrictions of any autocratic organization.

In order to close the discussion, which was fast becoming impractical, Dr. Hale proposed a Committee of ten, who should investigate the condition of the Pharmacies, and their methods of preparing medicines; also the character of the vehicles used, and to report at the next annual meeting. This was discussed with some asperity, and finally laid on the table. On the second day of the meeting, however, the matter was placed in the hands of a Bureau of Materia Medica and Pharmacy, who will probably look into it.

J. P. Dake, M. D., offered the following:

Resolved, That while the special object of our society pertains to the health of mankind, we cannot quietly meet again for the transaction of our usual business, without expressing our satisfaction and thankfulness to Almighty God for the suppression of the late dire rebellion and the restoration of peace, with the prospect of a yet nobler and greater prosperity than before enjoyed.

Adopted.

The same gentleman read a communication from T. S. Verdi, M. D., of Washington, D. C., describing the apparatus invented for, and used by him in, the treatment of a fracture of the jaw in Secretary Seward. Referred.

The General Secretary read a report from the Homœopathic Infirmary of Philadelphia, by B. W. James, M. D., attending surgeon. Referred.

Also, a report by the same gentleman, from the Northern Home

for Friendless Children, in Philadelphia, which was in like manner referred.

Ordered, that the Institute meet in the morning at 9 o'clock.

Adjourned till 8 o'clock, P. M., to listen to the annual address, by W. W. Rodman, M. D., of New Haven, Conn.

In the evening, notwithstanding the oppressive heat, the hall was pretty well filled, and we listened to a dignified and polished address from Dr. Rodman. Notwithstanding the almost insuperable difficulty in the way of treating a scientific subject in a popular manner, such was the success of the orator, that before the meeting closed, five thousand copies were ordered printed, for general distribution.

After the address, the company adjourned to the St. Nicholas Hotel, to partake of a sumptuous repast, offered by the homœopathic physicians of Cincinnati. The large parlors of the hotel were thrown open to the several hundred guests, composed of some of the fairest women, most notable physicians, and some of the most prominent citizens of Cincinnati. Among the latter we noticed the great jurist, Bellamy Storer.

"The memory of Hahnemann" was drank in silence, and feelingly responded to by Dr. J. H. Pulte. To another appropriate toast Dr. Gray responded in a happy manner. Finally, the toast—"The Ladies," was responded to as only Dr. Wm. T. Helmuth can respond to such sentiments. At the urgent request of the company, Dr. Helmuth repeated his original poem, the "Student's Dream," a production rivaling the wittiest efforts of Oliver Wendell Holmes. After this the company left in the best of spirits.

SECOND DAY.

This day's proceedings opened with a valuable and practical paper on Fibrous Tumors of the Uterus, read by Wm. Todd Helmuth, M. D., of St. Louis. He exhibited specimens of the three different varieties of tumors, and detailed with much precision the treatment, surgical and medicinal, to be adopted in each case.

An excellent paper from Dr. S. R. Beckwith, of Cleveland, treating of certain surgical operations, was read by Dr. E. C. Beckwith.

Professor E. M. Hale, of Chicago, read a very interesting paper, entitled "*A Medico-Botanical Study*." The object of the paper was to show the importance of proving each *species* of medicinal plants, as they probably possess varied properties, just as each "species" of disease will present different symptoms and conditions.

Dr. Hale referred to the fact that there were many species of such plants as Aconite, Pulsatilla, Cypripedium, etc., and we should be

careful that each should be proven separately. He thought that much of the tincture of Aconite used was not from the *A. napellus* alone, but from all and every other variety mixed. This was the fault of the pharmacutists. He showed that nearly every foreign medicinal plant used by us has its analogue in this country, and cited the Arnica, Aconite, Bryonia, Pulsatilla, and many others; and he urged the study and investigation of our indigenous flora. He would not say that we could judge of the value or similarity of medicinal plants by these botanical affinities. This was not always reliable. Hahnemann was quoted to sustain the position assumed. If those who are able and willing to prove medicines and test their clinical value, will aid Dr. Hale in his investigations, he will do much to increase the materials of our *Materia Medica*.

Prof. T. P. Wilson, of the Western Homœopathic College, offered a resolution relating to the hasty graduation of students, i. e., before they had actually complied with the law which obliges students of medicine to study *three* years and attend *two* courses of lectures before they are entitled to a diploma. Dr. Wilson asserted, with truth, that all colleges had been remiss in their duty in this respect, and thought it was high time a reform was inaugurated.

Here, again, during the discussion of the resolution, a certain member so far forgot himself as to stoop to personal attacks. Is it a natural effect of the position, that the incumbent of the Chair of Surgery in a Medical College must be vituperative?

Is it not true that our Colleges have been remiss in their duty to the public and themselves? Have they not turned loose upon community a lot of blockheads, under the name of M. D.'s, whose only title to the cognomen of physician is a diploma, bought, not by diligent study and merit, but by the *graduation fee*. Such M. D.'s order their medicines thus:

“Mercurious vivus, (mother tincture,) one ounce.
Hydrastin, (mother tincture,) one ounce.
Pulsatilly, bryonye,” etc., etc.

And who are perfectly ignorant as to the source of our *Materia Medica*, not knowing whether Mercurius is a *plant*, or Pulsatilla a *tree*. It is high time, indeed, that our Colleges turn over a new leaf, and send out graduates in something more than in name.

Dr. Talbot, of Boston, as Chairman of the Committee on Organization, made a report replete with valuable suggestions. The Committee advised that the Constitution be amended so that the Institute become a *delegated* body. This was not to preclude the retention of

all its present members, or the admission of new ones, but it provided that none but delegates from other societies should take part in the formal deliberations. The ratio of representation was very liberal. Delegates were permitted from State, County, City, and other local societies; also from colleges, journals, dispensaries and hospitals. No action could be taken on this proposed amendment, at this meeting, as it is obliged to lie over until the next meeting. The members of the Institute were generally in favor of the amendment, and the report was accepted. During the discussion, Dr. Beebe denounced the report as one which would compel members not delegates to "keep their mouths shut." He declared his unwillingness to let the accepted report go upon the records of the Institute. This autocratic assumption of power in the Secretary created some considerable surprise in those who did not know Dr. Beebe's peculiarities.

Dr. Talbot courteously but earnestly defended the proposed amendment. He declared it would make the Institute the strongest medical organization in existence, and cited the New York State Society, which was wholly made up of delegates. It did not debar any member, a delegate or not, from contributing papers on medical or scientific subjects. The people respect *organizations*, and the Government would respect it, if it was backed up by delegates from State, Counties, etc. It would also stimulate physicians of every State, County, City, etc., to organize into societies, which they have utterly failed to do in half the States. Drs. Beebe and Smith opposed the admission of delegates, at the opening of the Institute, and for some special reason, fought the proposed amendment. It was, however, sanctioned nearly unanimously, by the passage of a Resolution, which invited all Homœopathic Medical Societies, etc., to send delegates to the next meeting of the Institute. It is to be hoped that at the next session the amendment making the Institute a delegated body, will be passed. Then with an *Eastern* Institute organized, and also State and County Societies in every State, the Institute will become a really powerful body, whose influence will advance the interests of Homœopathy, and do more to gain its admission into the Army and Navy, into State and local hospitals, than all the efforts of individuals.

The following committees were appointed:

Materia Medica and Pharmacy.—C. Hering, M. D., Pennsylvania; W. E. Payne, M. D., Maine; W. Williamson, M. D., Pennsylvania; E. M. Hale, M. D., Illinois; H. L. Chase, M. D., Mass

Clinical Medicine and Zymoses.—W. D. Paine, M. D., New York; J. P. Dake, M. D., Pennsylvania; R. Ludlum, M. D., Illinois; E. C. Witherell, M. D., Ohio; B. Fincke, M. D., New York.

Surgery.—W. T. Helmuth, M. D., Missouri; J. Beakley, M. D., New York; G. D. Beebe, M. D., Illinois; S. R. Beckwith, M. D., Ohio; Pusey Wilson, M. D., Pennsylvania.

Organizations and Statistics.—J. T. Talbot, M. D., Massachusetts; H. M. Paine, M. D., New York; H. M. Smith, M. D., New York; Geo. E. Shipman, M. D., New York; J. S. Douglass, M. D., Wisconsin.

We do not know how to account for the oversight in not appointing a Bureau of Obstetrics. It is generally useless to have embraced in a single Bureau such extensive subjects as "Surgery," "Clinical Medicine," etc. A committee can much easier handle a subject having less scope. We predict a general failure of the Committees to report. As a rule, no committee should be composed of more than *three* members, and the subject should be limited to one disease, one medicine, or one speciality.

Resolved, That when the Institute adjourn, it be to meet in Pittsburgh, on the first Wednesday in June, 1866.

The following were appointed a Committee of Arrangements for the next session of the Institute, to be held in Pittsburgh:

M. Cate, M. D.; J. C. Burgher, M. D.; J. F. Cooper, M. D.; D. Cowley, M. D.; H. H. Hoffman, M. D.; all of Pittsburgh.

Wm. Todd Helmuth, M. D., of St. Louis, was appointed orator for the next meeting. Pusey Wilson, M. D., of Philadelphia, alternate orator.

As a general summing up, the meeting of the Institute has been a success. A general good feeling was manifested between the members, East, South and West. Nearly all the Northern States were represented; also Kentucky, and one or two Southern. It is confidently hoped that at the next meeting we shall have representatives from every State in the Union.

Many new members were admitted, but there are hundreds of *working* physicians outside of the organization who ought to become members. Like a community of bees, the Institute has its "workers" and its "drones." There may be said to be another class, namely, the "wranglers," who are permitted by some inscrutable Providence to infest and plague every organization. These fellows sometimes play the part of the "Dog in the Manger;" they will not work themselves, and try to prevent any one else from working. Some of this class, we regret to say, are old men, who are singularly averse to the idea of having young men work. They fear the tendency of such young workers upward and onward. However, there is a time for all. *Long live the Institute.* Nux.

Practice of Medicine.

BAPTISIA IN FEVERS.

BY J. HARMER SMITH, M. R. C. S., BLACKHEATH.

Case of Gastric lapsed into Typhoid Fever, treated by Baptisia Tinctoria.

CASE.—V. A—, æt. about 27, City Missionary, Hampstead. Sanguine-bilious temperament.

March 2d, 1863.—I received an urgent telegraphic message to visit him immediately, as he was very ill of fever. I was not surprised to receive this intelligence, as I was aware that he had been in daily attendance on a poor boy who lived in a low and crowded lodging-house in the immediate neighborhood of his own dwelling, and who had been dangerously ill of fever. I visited him at once, and found him as had been described in the telegram.

The symptoms were what the old writers would have described as being of a phlogistic character, and Cullen as marking a synochal type of fever. There was hot, dry skin, flushed face, rapid and full pulse, headache, throbbing of the temporal arteries, &c., &c., for which I prescribed *Aconite* and *Belladonna*. He took *Aconite* until the next day; but I continued the *Belladonna* for several days. There was no material change until the evening of the 5th, except that the inflammatory symptoms were gradually moderated.

6th.—Wife says his symptoms became aggravated late last night; wanted to get out of bed in the night, and had to be held there by force; talked wildly all night; symptoms distinctly typhoid; pulse 100; tongue baked down centre, and yet less thirst than there has been. Diarrhœa frequent and urgent; motions passed in bed; not troubled about it afterwards. *Tinct. Baptisia*, gt. $\frac{1}{8}$ o. hora; *Arsenicum* 1, p. r. n.

7th.—Diarrhœa continues. Still passes motions in bed, but bowels not moved for two or three hours previous to my visit. Tongue not so dry; quieter; regards you with a stupid stare, and a bewildered expression of countenance. Omit *Arsenicum*, continue *Baptisia*.

9th.—Rose-colored spots tolerably numerous on trunk, slightly raised, disappear under firm pressure; skin dry and hot; decided improvement in intelligence; complained of feeling as if not at home; asked if he should get better; complains of uneasy feelings in head, not amounting to pain; frequent groaning; scalp hot; face flushed; cold applications to head grateful; pulse 90, soft and compressible. Tongue, thick dark coating; sometimes he has much difficulty in protruding it. Allows fluids given him to run out of his mouth; asked for bread and butter, but could not get it down, and requested his wife to take it out of his mouth. Bowels moved once; motion liquid; asked for bed-pan; micturation free; urine normal in appearance. Continue *Baptisia*.

Evening.—Pulse 84, small and soft; says he feels better; much dysphagia.

10th, 8.30 A. M.—Sleepless night; headache; scalp hot; incoherent talking during a part of the night, but sensible now; constant moaning during night, which kept his wife awake in next room. Can swallow much more readily, but tongue still protruded with difficulty.

In spite of the amelioration of the symptoms, they were still sufficiently grave to excite some alarm, and some of the relatives of the patient desired him to see an Allopath. This being, however, decidedly objected to by his wife, my friend Dr. Kidd kindly consented to visit him by my request.

4 P. M.—Visited by Dr. Kidd, who noticed that there was a good deal of tenderness in the region of the descending colon, and diagnosed ulceration there. As the *Baptisia* was evidently doing good, he recommended its continuance, with an occasional intercurrent dose of *Belladonna* if there were much delirium; which was only, therefore, given during the subsequent night.

11th.—Dozed several times in the night; excited each time on awaking. Diarrhœa returned in the night; motions passed in bed, although conscious, but unable to restrain them; increased tenderness of abdomen. Tongue moist; furred centre and red margin. Pulse 96, fuller. Head cool; pain gone. Continue *Baptisia*, *Arsenicum* 1, p. r. n.

10.30 P. M.—Slept all evening; awoke quite sensible; pulse 75. Continue medicine.

12th.—Slept all night without moaning. Inquired after family matters for the first time since his illness; intelligence fully returned. Pulse 72; no return of diarrhœa; abdominal tenderness much lessened, and confined to umbilical region. Begins to complain of thirst. Tongue, furred centre and red tip and edges. Omit *Arsenicum*, continue *Baptisia*.

Evening.—Dozed all day; asked for food and drink; bowels moved once.

13th.—Slept well. Tongue dry; great thirst; abdominal tenderness gone; ate part of a chop without my leave; pulse 72. Continue *Baptisia*.

14th.—Slept well. Tongue moist; pulse 72; constant dozing. Continue *Baptisia*.

15th.—Continues to improve. Continue *Baptisia*.

17th.—Further improvement. Omit *Baptisia*. *China* ter die. Able to leave his bed in a day or two after this report, and called on me on the 28th.

This was clearly a case of typhoid or enteric fever, judging both from the history and symptoms. It was distinctly traceable to infection. The symptoms began a few days after my patient had paid repeated visits to a case of fever. In the earlier stage of the disease the symptoms were what are generally known as gastric fever; which is viewed, I think, by most writers on fever as descriptive of a certain form and stage of typhoid fever, and, though marked by very definite symptoms, yet not as being a distinct disease.

The *Baptisia* I felt, both at the time and subsequently, had a decided influence in mitigating the symptoms, and in conducting the case to a favorable issue. It had been only introduced to my notice by Dr. Hughes on the evening previous to my prescribing it in this case.

If I had then studied its pathogenesis, I should have been aware that it has diarrhœa amongst its symptoms, so that I need not have given intercurrent doses of *Arsenicum* when diarrhœa supervened.

The rapid cure of the symptoms of enteritis, also the rapid decline in the rapidity of the pulse, were very remarkable.

I considered that there was decided amelioration in the symptoms before the case was visited by Dr. Kidd, but I thankfully consented to his being asked to visit it, in consequence of my laboring under great disadvantages in treating it, which his justly earned reputation would, I knew, materially lessen. Not only were all the relatives of the patient, except his wife, decidedly opposed to omœopathy, but

also the more influential members of the City Mission in the neighborhood used all their influence with Mrs. A. to induce her to send for their own medical man, urging not only the inefficiency of Homœopathy as an argument, but also presenting, as an inducement, that she would have to pay for my attendance, whilst the Society would provide her with an Allopathic Physician at their own expense.

It certainly appears inequitable that a purely religious society like the London City Mission, which no doubt includes many Homœopaths among its subscribers, should practically come to a decision and take a side in a purely medical question, by providing Allopathic attendance alone for its Missionaries.

Case of Gastric Fever treated by Baptisia.

G. B—, clerk, æt. 28, Greenwich. Lymphatic temperament.

December 6th, 1864.—Is clerk at an extensive iron foundery, and thinks he has been made ill by having his meals only half cooked by a contractor. His appearance in general is pale and sickly, and as if possessing little vital power, but is not often ill.

Now—languor, nausea, furred tongue, large ulcer inside lip; anorexia; pulse 65. *Mercurius* 1.

8th.—Nausea; debility; violent eructations, which come on about every half hour. *Nux Vomica* 1; omit *Mercurius* 1.

9th.—Eructations less violent, but vomiting has supervened; vomited matters tinged with bile. Bowels not moved for several days. *Ipecac.* 1, omitting *Nux Vomica*. To have an enema of tepid water.

10th.—Constant nausea. Vomiting and eructations both somewhat abated; increased debility; no tenderness on pressure in any part of abdomen; bowels moved by the injection; pulse 70, small and soft. Continue *Ipecac*.

12th.—Much the same as last report. To be allowed ice. *Kreosote* lx, 3tis horis.

13th.—Nausea, vomiting, and eructations less frequent; tongue dry and baked; pulse 100, small, and compressible; little sleep, and much vertigo in the night; finds the ice very grateful. Wife complains that his temper is very irritable. *Belladonna* 1.

14th.—Little sleep; rapid pulse; no vomiting nor retching all night. Received some annoying tidings early this morning and the vomiting and retching immediately supervened, and have returned repeatedly since. No abdominal tenderness nor hardness.

Evening.—Still vomiting and retching, also diarrhœa; pulse 100, feeble and small; tongue dry and baked. *Arsenicum* 2, every two hours.

15th.—Frequent eructations, and bilious vomiting in the night, also diarrhœa; tongue dry.

Evening.—Bowels moved five times since morning—once involuntarily and unconsciously; vomiting continues. Delirious and incoherent talking at times—remarking, for example, that “it was no use his wife sitting up with him, so long as she could not keep those big fellows from coming into the room.” Pulse small and compressible; tongue dry and covered with a thick brown crust. *Arsenicum* 1, every two hours.

16th.—Slept better in the night; vomiting ceased. Diarrhœa continues; some of motions still passed involuntarily; tongue covered with a thick brown crust. Took some beef-tea, which the stomach retained; pulse 80; thready. Continue *Arsenicum*.

Evening.—Diarrhœa continues; some vomiting; pulse 100, thready. Has taken a small quantity of wine and beef-tea.

17th.—Restlessness, with incoherency at times; pulse 100, small and feeble. Continue *Arsenicum*.

18th.—A perfectly sleepless night; pulse 100, and thready; much retching; little vomiting; diarrhœa ceased. *Baptisia tinctoria* $\text{gt}\frac{1}{2}$ secundis horis. Omit *Arsenicum*.

19th.—Feels better; has slept several hours during the day and night. Has this morning taken several cupsful of diluted milk with bread for the first time since he began to be ill. No retching, nausea nor vomiting. Continue *Baptisia*.

Evening.—Continues to take the bread and milk, which causes no unpleasant symptoms. Tongue still baked in centre, but over a smaller surface than heretofore; pulse 95, small and full. Has slept most of the day.

21st.—No return of sickness. Lives on bread and milk. Central dry crust on tongue, sides moist; pulse still 95. Continue *Baptisia*.

23d.—Further improvement. Pulse stronger, but increasing *feeling* of debility; mucous membrane of mouth sore, so that it is painful to eat. Continue *Baptisia*.

24th.—Great languor and anorexia. Lives chiefly on bread and milk. Continue *Baptisia*.

25th.—Still dry crust on centre of tongue. Omit *Baptisia*. *Bryonia* 1x, $\text{gt}\frac{1}{2}$ every four hours.

26th.—Dry crust on tongue as before. Continue *Bryonia*.

29th.—Much better. Tongue clean and moist; appetite and strength increasing. Sleeps well. Continue *Bryonia* bis die.

January 3d.—Debility only. *China*.

His convalescence from this time was rapid, and would have been more so had he not delayed it for a few days by taking a supper of toasted cheese, which brought on an attack of vomiting, which was, however, relieved in a day or two by *Ipecac.* and *Nux Vomica*.

The early symptoms in G. B—'s case illustrate the difficulty of diagnosis in certain cases of fever, whilst in the premonitory stage. I had an excellent opportunity of observing the invasion of the disease, being in attendance on the wife of my patient after her confinement, at the time he was taken ill. My primary impression about the case (and which I entered in my case-book at the time), was that the symptoms were due to acute dyspepsia. This diagnosis was favored by the patient's own impression of the cause of his illness, referred to above, as well as by the pulse never rising above 70, nor being remarkably deficient in power. The persistence of the vomiting in spite of treatment would have led to the suspicion of malignant disease of the stomach, but for the previous good health of the patient, and the rapid invasion of the symptoms.

After the continuance of the vomiting, &c., for nearly a week, had set aside the hypothesis of merely functional derangement of the digestive organs, I feared, until the occurrence of symptoms pathognomonic of fever, that I had got a case of cerebral disease in the early stage—which Abercromby and other writers have shown to be frequently heralded by nausea and vomiting—no head symptoms (as in this case) at first being present. Although, however, the vomiting was not the precursor of cerebral disease, yet its relation to disordered innervation rather than to primary gastric affection was indicated by its renewal on the 14th of December by mental disquietude.

On the whole, on reviewing the circumstances, I do not see anything in the symptoms of this case that would have led a more expert or painstaking diagnostician than myself to have foretold, with certainty, the advent of fever. Viewing the case as a whole, it is now clear that the symptoms were the result of blood-poisoning; the rapid recovery was therefore the more remarkable. Even allowing this to be due in part to the elimination of the materies morbi by the evacuations, yet I fully believe that the amelioration of the symptoms stood to the medicine not only in the relation of *post* but of *propter*.

"A swallow does not make a summer;" but it must be allowed to be at least a remarkable coincidence, that there should in each of these cases be an immediate improvement in the symptoms after the exhibition of the *Baptisia*, and that in a week from the day on which it was first given, and on which the crisis of the disease was not pas

the patient might be justly pronounced out of danger. In the second case, especially, there was considerable reason to believe that the disease was prevented from passing from the gastric into the typhoid phase by the remedy in question. Some of the existing symptoms also were at once ameliorated. There had been a succession of restless nights, which had reached their climax on that previous to the day on which the *Baptisia* was commenced, but it appeared at once to set aside that morbid irritability of the nervous system which prevented sleep—thus acting like a narcotic without its unpleasant concomitants.* Nor was there any renewal of the retching and vomiting, with the exception referred to at the conclusion of the notes of the case. The appetite for food, also, which had been absent from the first, was at once excited. The pulse, which had been variable, but generally rapid and always weak since the development of fever, rapidly diminished in frequency and increased in strength. I am inclined to think, since studying the provings of *Baptisia*, that after the 22d of December the soreness of the mouth and dryness of the tongue, which remained after the cessation of the other symptoms, were due to medicinal aggravation.

I may make a similar observation in reference to this case as to the former one. If I had then been acquainted with the provings of *Baptisia*, and known that it had vomiting, eructations, and diarrhoea, I should have given it two or three days sooner than I did.

I have treated several other cases of gastric fever with *Baptisia tinctoria*, but the notes I have preserved of these are not full enough for publication, although I have notes of some other cases of fever which I think of publishing. If, however, my reference to the subject should induce Dr. Hughes to favor the readers of this journal with some of the cases cured by the remedy in question, and to which he has alluded in former numbers, I shall be much pleased that I have published these cases, limited as I acknowledge my experience in the use of this valuable remedy to have been. I feel, also, that I have laid myself open to the strictures of my readers by my confession of having prescribed a medicine before having an opportunity of acquiring a knowledge of its provings. I was not, however, aware, prior to the publication of the last number of this journal, that the provings of *Baptisia* were to be found anywhere but in the *North American Journal of Homœopathy*, to which I had not access. Still, I felt justified in prescribing this medicine, on Dr. Hughes' warm recommendation, until I could obtain the provings. I had not gained any stri-

* This effect of *Baptisia* especially struck me on the first occasion of my using it.—R. H.

king results from other medicines in typhoid fever, and should have supposed that it would have been generally admitted that our resources in reference to it were not so ample as not to render other remedies a desideratum. I am not aware, however, that Drs Madden and Hughes' commendation has led to *Baptisia* being tested by British practitioners; and the only reference I have known made to it on the part of our colleagues has been in a sceptical tone. This reminds me of a remark recently made in reference to this very subject by a highly respected colleague, and endorsed by others who were present, viz., that "it was very bad practice to prescribe for a name." When, however, the "name" refers to a definite group of symptoms, as is the case in gastric fever, I must beg to take exception to the dictum in question; and as there is a tendency in the minds of some to take a one-sided view of this most important practical question, I shall take this opportunity of making a few remarks on the subject.

Granted that a large proportion of the cases we have to treat, especially those of a chronic character, cannot be accurately described or distinguished by any nosological term; and both diagnosis and prognosis being involved in greater or less obscurity, that symptoms must be individualised and treated as they arise; yet it is certainly not so with all diseases. Many acute diseases—most, if not all, of the exanthemata—run a more or less definite course, and are characterised by symptoms which, if not absolutely the same, have a greater or less family likeness.

Now, are we practically denying or carrying out—are we traitors or friends to Homœopathy in using and seeking medicines which, in their symptoms, have a resemblance to the disease not in one feature only, but more or less in all? Are we wise to be content with remedies which touch the disease at a single point, or are we not rather to aim at as complete a parallelism as possible? To turn to a department of natural history as an illustration. The great superiority of the botanical system of Jussieu over that of Linnæus is allowed to be, that it respects and represents natural affinities, whilst, in the artificial system of the latter, plants are often placed in juxtaposition which Nature has most widely severed. Even so it should surely be our aim in therapeutics that the disease and the medicine should be as closely *en rapport* as possible; not only having one point of resemblance, but that there should be a similitude in the totality, or at least the majority, of the symptoms. As, however, in natural history the natural and artificial systems may, in certain exceptional cases, agree in expressing the relation between individuals which are naturally in

close alliance, so in exceptional cases in therapeutics the founding the choice of the medicine on one or two prominent symptoms may possibly guide to a right selection. But such cases, I repeat, are the exception, and not the rule. Habitual success, especially in the treatment of acute and well-defined diseases, can only be secured by prescribing medicines which, in their semeiology, touch the disease not by one or two only, but by many points. Thus there may be established so clear a resemblance between the medicine and the disease, that we have certain remedies that stand in known and admitted relationship to certain typical forms of disease. Is, then, the use of the one for the treatment of the other to be stigmatized as prescribing for a name? By this process of generalization, or rather of grouping, it was that the Founder of Homœopathy was enabled to prescribe and recommend with confidence *Belladonna* for "smooth scarlet fever," *Aconite* in purple rash, *Spongia* and *Hepar* in croup, *Drosera* in whooping-cough, *Mercurius corrosivus* in dysentery, *Thuja* in syphilis, &c.*

We may also expect that, as our knowledge increases on the one hand, and the number of our medicines on the other, our treatment will become increasingly simple and successful. For instance, it is only during the last few years that the specific distinctions between typhoid and typhus fever have been understood and recognized. Now, the special applicability of *Baptisia* to the former disease renders it probable that it will not be found curative in the latter; even as Hahnemann has shown that the peculiar adaptation of *Belladonna* to true scarlet fever renders it unsuitable for the treatment of the modification of the disease, which he describes as purple rash. If, however, the distinction between these several diseases had not been understood, the proved inefficiency of the medicine in the one might have led also to its rejection in the other. In this way I think it probable that the labors of the old school in pathology may materially aid us, if we are not less diligent in the study of pathogenesis, and not too soon satisfied with our success in the treatment of any well-marked disease.

As many of my readers may not possess a copy of "Dr. Hale's New Remedies," especially as I find that the supply furnished to the English publishers is at present exhausted, I will transcribe a few short extracts from the provings of *Baptisia tinctoria*, bearing upon the treatment of gastric fever. The provings were made by four American physicians.

General Symptoms.—Very disagreeable prostration of the whole

* Vide Dr. Dudgeon's translation of Hahnemann's "Lesser Writings," p. 779

system. Felt weak and tremulous, incapable of making any vigorous mental or physical exertion; indescribable sick feeling all over, with great languor.

Nervous System.—Arms and legs tremble; numb sensations all over the body.

Vascular system, fever, &c.—Pulse 90, full and soft; tongue felt dry, and felt sore as if burnt; the excitement of the brain, which is the preliminary of delirium; mental excitement, bordering on delirium; want of power to think; restless night, with frightful dreams; vertigo severe; frontal headache; confusion of sight.

Mouth, Tongue, &c.—Ulcers in mouth; tongue coated yellow along centre; tongue feels dry on rubbing it against roof of mouth; loss of appetite; tongue coated at first white, with reddish papillæ here and there, followed by a yellowish-brown coating in centre, the edges being red and shining; bad taste in mouth, in teeth, and gums feel sore.

Stomach.—Disposition to vomit, with great eructations of flatus; nausea; slight nausea, followed by vomiting; want of appetite, and constant desire for water.

Abdomen, &c.—Pain in abdomen on pressure; vomiting and diarrhœa, with dark stools; stools generally dark, offensive, mucus, and even bloody. Coe says, "in the treatment of ulcerative inflammation of the bowels and stomach, and chronic diarrhœa and dysentery, its use should never be omitted."—*British Journal of Homœopathy*, July, 1865.

For the American Homœopathic Observer.

LOW DILUTIONS.

BY GROMEL, JR.

At an early hour, upon the 6th of May last, I was called upon to treat Mr. W., suffering from *Bilious Colic*; the messenger informing me that my patient was supposed to be near his end, as up to that period he had suffered forty hours, the malady having resisted the most approved alopathic treatment, thus far.

Half an hour's ride brought me to his residence. Upon entering his room, I found him in bed, bent double, uttering the most pitiable groans, and pressing a moderate-sized stick of wood against his stomach to relieve his agony. He was incessantly vomiting large quantities of acrid bile, the taste of which caused a spasmodic shudder, almost amounting to a convulsion. The face was exceedingly pale, skin drawn tight over the forehead, upon which stood large drops of

clammy sweat. The nose pinched, eyes sunken, and cheeks hollow. Upon an examination of his person, the extremities were cold and bathed in sweat; cramps in the calves of the legs; abdomen retracted and the muscles thrown into cord-like knobs; pulse soft and rapid. Upon inquiry I found that no alvine evacuation had been procured for three days.

Here was an interesting case. It might be obstruction of the bowels, but the length of time bile had been vomited, to the exclusion of any stercoraceous element; the borborygmus, periodicity of the attacks; together with the general symptoms, pointed unerringly to the true source of the malady. In order to free the bowels, an enema of castile soap and warm water was resorted to. Warm fomentations to the abdomen, and *Nux* and *Colocynth* 3d given every half hour.

No perceptible amelioration of the symptoms obtained for the space of two hours, when the enema brought away a few sybala, followed by an amount of almost pure, but acid, bile. I now returned home, directing the fomentations continued, another injection given, and the *Nux* and *Colocynth* repeated at intervals of an hour, and as amelioration progressed, the intervals extended, and in case he became perfectly easy, to stop the administration entirely.

Having been in the country, I was surprised to find, on my return, about five in the evening, a note summoning me immediately to Mr. W.'s residence. Upon my arrival I found my patient in terrible agony. The pain was so intense, he prayed for death. I was informed that from 12 o'clock the fomentations became unbearable, and that every dose of medicine perceptibly aggravated his sufferings, so he was obliged to discontinue it at about 2 P. M.

I now gave *Podophylline* 3, for about an hour, without any visible effect. *Plumbum* and *Chamomilla*, *Aconite* and *Mercurius*, *Cocculus* and *Iris*, each left me in the lurch, while my patient's condition was momentarily becoming more alarming.

Upon a review of the whole case, *Nux* and *Colocynth* seemed most strongly indicated—the prostration alone calling for *Arsenicum*, and in order to test, it was given at the 30th. An half hour of agony followed, when it was succeeded by *Nux* and *Colocynth* at the same dilution, warm fomentations applied, and the result anxiously awaited. No abatement following, I gave two grains of the 1st decimal of *Nux*, followed in fifteen minutes by *Colocynth* 1st, intending, if this did no good, to give the same amount of the pure drug, holding my *Morphine* in reserve, to administer as a palliative, and obtain time for reflection. Happily for myself and patient, this was not needed, as he was in a

sound, refreshing sleep, thirty minutes from the time the dose, *Nux* 1st was administered. No repetition of dose followed, and his convalescence was rapid as his disease had been obstinate and dangerous. Last week he had a slight return. The same remedies, one dose each, quickly restored him. I think this a fair trial of the high dilutions, and will apply to all diseases affecting the vegetative organs. I have no doubt my patient would have collapsed under the high potency regime.

For the American Homœopathic Observer.

A QUESTION.

Permit me to ask, through your journal, a remedy for the following case:

Boy, aged ten, has severe pains in both hands, coming on at night about 1 or 2 o'clock, and lasts from one-half hour to an hour. When the pain comes on he is obliged to get up until it ceases. His fingers will be about half shut, hands are cold, and at other times warm. Pain will come on sometimes every night, and at other times at different intervals. He will be free from it at times for weeks. Otherwise is in good health. He has been affected thus for two years.

SHILOH, Ohio.

J. M. F.

For American Homœopathic Observer.

CASE OF CHOREA.

BY J. D. BUCK, M. D.

During the summer of 1863 I was called to see a patient suffering from chorea, and as it was a well marked case, and responded promptly to the remedies used, it may be worth reporting.

Mary E——, æt. 14. Had for two or three weeks previous been unable to control her movements. There was irregular movement of the limbs; so much so that she could neither walk with safety, nor even feed herself. Symptoms worse upon the right side. There was also considerable lassitude, and the patient kept her bed much of the time. About the time these symptoms first declared themselves, she had been troubled with a tooth, which was finally extracted, but not until the alveolar had been injured, and pus escaped through an opening near the root of the tooth. I prescribed *Nux* 30, and *Cocculus* 20, on pills, to be taken every two hours in alternation during the day. At my next visit, two days after, there was marked improvement. I continued the medicine, and saw the patient on each alternate day, until the fourth visit, when she met me at the door and wanted to

"shake hands." I next saw the patient at my office, about ten days after the last visit, when there seemed to be no trace of the malady remaining. No other medicines were given, and I have since used them when similar symptoms have occurred, with equal satisfaction. Had the disease been of longer standing, I should have preferred a higher potency. I may add that there seems to be an inherent *weakness* of *memory* in the family, for up to the present time they have forgotten to pay me for relieving the daughter of a really distressing malady.

For the American Homœopathic Observer.

CACTUS GRANDIFLORUS IN BRONCHITIS.

BY GEO. DUMRING, M. D.

Dr. Rubini truly deserves great praise and honor for the discovery of this powerful antiphlogistic medicine, and I am glad it has been reserved to Homœopathy to arrive at the discovery, and to propose to science other means of curing promptly inflammatory diseases without blood-letting.

I am confident no humbug is connected with the newly proposed remedy, because I have already been very successful with it in many cases, some of them severe, in my own practice. Moreover, I cannot for a moment doubt its powerful effects upon the human system, for the strong reason that I have already used it also upon myself, and with really unexpected success.

I am in my 62d year, and for some time have been a great sufferer from "Chronic Bronchitis," that was accompanied with frequent rattling of the mucus, both through the day and at all hours of the night: oppression in breathing, with a spasmodic cough and expectoration of mucus, also frequent attacks when attempting to go up and down stairs. Various remedies proved useless until I concluded to try some "Mother tincture" of *Cactus grandiflorus* that I had accidentally prepared last year, and this at once restored my health.

Proving.

For the American Homœopathic Observer.

ON PROVINGS.

BY W. H. BURT, M. D.

I recommend that provings be made, first of the 30th, second of the 10th, third of the 30th, and lastly, with massive doses of the crude drug, and that the following rules be observed:

1. When no symptoms are developed, repeat the dose several times through the day.

2. Never repeat a dose until the symptoms of the former one have subsided, until the proving is being made with massive doses of the crude drug, then it should be taken every two or four hours, until health is jeopardized, so as to get the pathological symptoms.

3. The remedy should be prepared in pure distilled water, so as not to confound the symptoms of the remedy with those of alcohol. When the crude drug is proved, it had better be chewed until thoroughly masticated, and then the whole swallowed, it having previously been weighed.

4. The symptoms should be noted down in chronological order, their duration and peculiarities; the whole followed by a complete resume.

5. All peculiarities of the weather should be noted; whether cold, hot, dry, damp or windy; the variations of the thermometer should be noted daily, at 8 A. M., 4 and 9 P. M.

6. The temperature of the body noted when taking massive doses, by placing the thermometer in the axilla, as well as the pulse.

7. The age, sex, temperament, idiosyncrasy, and any existing dyscrasy or derangement of health of the prover.

8. The urine should be measured daily one week before the proving, during the proving, and one week after the proving. To get at the amount of urine secreted daily it is of the utmost importance to note the temperature of the weather, for the secretion of urine in a cold day is several ounces more than it is in a hot day. The urine should be thoroughly tested during the whole proving and several days after.

9. The diet and habits of life should not be changed in the least.

10. Whether the prover is active or sedentary during the proving; in the house or out in the open air when the symptoms occur.

11. Notice particularly what effect excitement has upon the effects of the remedy.

12. Examine the stools, and if there is anything peculiar about them, test them. Eyesight alone will often deceive us.

13. Exercise great caution in verifying the symptoms by repeated experiments, in order that all imaginary, chemical and mechanical symptoms may be excluded.

14. Critical days and symptoms, to make a proving perfect, should be particularly watched for and noted.

15. Characteristic symptoms should be most accurately noted.

16. Note the position of the prover when the symptoms appeared ; whether standing, sitting, lying or walking ; how repose or motion affects the symptoms ; also, what effect eating or sleep has upon them.

17. If any eruption of the skin takes place during the proving, that you are confident is an effect of the remedy, give an accurate description of it, with drawings, colored, the color of the eruption or tumor, their full size, &c.; this is very important.

18. Make every possible effort that is in your power to obtain provings upon females, and before they commence proving the drug, examine the vagina and uterus carefully with the speculum, three times, at intervals of two days each, and note its color, and if the organs are in a perfect state of health ; if there is any disease, be very careful in giving a description of it. During the proving, examine the organs as often as every other day ; making full notes each time. Also introduce the thermometer, so as to learn the temperature of the vagina. If leucorrhœa occur, test it, to know whether it is acid or alkaline. Be careful to note if the leucorrhœa is vaginal or uterine. Not one remedy in our *Materia Medica* has its effects upon the generative organs of woman accurately described, and before we can treat the diseases of the vagina and uterus scientifically, we must have provings made, of all our remedies, on woman, the generative organs examined as above specified, and the effects photographed or accurately drawn and colored.

I would suggest that the following remedies be proven, *Aconitum Uncinatum*, *Boletus Pini*, *Mitchella Repens*, and *Pulsatilla Nuttaliana*.

I would also suggest that the *Pulsatilla Nutt.* be experimented with on pregnant animals, by injecting the medicine into the veins and giving it internally, so as to learn its effects on the uterus.

For the American Homœopathic Observer.



ROBINIA PSEUDO ACACIA.

Partial proving by F. X. SPRANGER, M. D., reported to Michigan Homœopathic Institute.

August 30th, 7 p. m.—Took 40 drops of the tincture in water. Shortly afterwards experienced a dry, scratching sensation in the throat.

11 p. m.—Great distention of the bowels, with flatulence. The intestines seemed to be extended to a great degree, and were very painful. Relief after flatulent discharges. Still a great deal of rumbling in the bowels, which extended over the whole abdomen, but not as painful.

August 31.—Sensation of soreness in the bowels when moving, or upon pressure.

2 P. M.—Took 40 drops. No symptoms till 11 o'clock, when the same distention and rumbling in the bowels took place again, and seemed to fill up the whole abdomen. Bowels costive, but a frequent ineffectual desire for stool.

Partial proving by my brother :

August 31.—Took 15 drops of the tincture, in water, at 1 P. M. A little while afterwards slight headache. At 3 o'clock sleepiness and dullness in the head and limbs, with stinging pains in the temples, changing from the right to the left side. Eyes felt sore and watery. Dreadful dullness in the head, about 5 o'clock. Most severe dull headache and pain in the right temple; running of the nose; rough soreness of the throat.

Sept. 1.—Dull headache and very profuse continual discharge of the nostrils, with frequent sneezing, the same as from a bad cold. Chest pains very severely; roughness of the throat and soreness of the eyes; restless sleep all night, on account of frequent sneezing; sourness of the stomach, but more particularly the discharge of the nose and roughness of the throat. Symptoms continued for several days, then passed off gradually.

PULSATILLA NUTTALLIANA.—Dr. Burt is now proving this drug.

Colleges and Societies.

For the American Homœopathic Observer.

MICHIGAN UNIVERSITY CATALOGUE OF 1865.

The current year brings us an unusual quantity of annual announcements and catalogues. The close of the war, the paralyzing effects of which have been felt by all the educational institutions of the country, has served to quicken into new life these heretofore languishing bodies, as well as to bring quite a swarm of new ones into being. Not at all disheartened by the failures and embarrassments of their predecessors, new candidates for public favor, of medical, scientific and literary character, come knocking at our door and crave our patronage.

Some few of them, of the literary and scientific class, present flattering credentials in the shape of partial endowment funds, gifts

and grants ; some from public and some from private sources. And we fancy we can notice in them an air of confidence and self-assurance not possessed by their plucky but less fortunate competitors. Among others of these new fledgelings, high-sounding titles and a flaming display of promises are about the only guarantees they furnish of success. And we gladly take them all by the hand and bid them God-speed.

It seems to us a curious fact, that, indebted as the public are to the medical profession, the project has never been started among the wealthy for leaving liberal bequests to medical institutions.

Called, as the physician often is, to witness a last will and testament, why does he not suggest to the testator the propriety of endowing some medical school, and thus by a praiseworthy deed immortalize his memory ? We know of several homœopathic colleges the patrons of whose alumni might, we think, be induced to grant such liberal bequests that they could be placed beyond future embarrassments, and made free schools to all seeking a knowledge of the divine art of medicine.

A comparison of the various annual announcements has surprised by showing how evenly the medical institutions have kept pace with other schools. What they lack in number they certainly make up in amount of patronage ; and during the past four years we mistake if the medical colleges have not taken precedence in this particular. The demands of the army, and the ease with which candidates through a certain *regime* could obtain lucrative and honorable positions, have induced a large number of young men to hastily complete a medical course, and obtain a diploma, back of which they were very certain of finding a commission. Now that Othello's occupation is gone, we feel certain in predicting a marked falling off in the number of pupils in attendance on allopathic colleges, and as surely an increase of them in the homœopathic schools. And we may remark, *en passant*, that those young men whose devotion to Truth and its triumph has held them on unswervingly to the study of homœopathic medicine and surgery, and to attendance on homœopathic schools ; whose diploma gave them no royal prerogative to army rights, where they might legally stain their hands in the hecatombs of military medical practice, are worthy of all praise. The future fruits of civilization will crown their history with enviable renown.

Among a multitude of circulars, we find not least attractive that of the University of Michigan, for 1865. Michigan is undoubtedly without a compeer in the Union in her educational interests. Her

many independent and denominational schools, as well as the State University, are enduring monuments of praise to the enterprise and intelligence of her citizens. It is to be regretted that this successful experiment of a State School has not been adopted by other States. But it is equally to be regretted, that in this experiment was ever included the plan of teaching medical science. The result has been, as is well known, to give patronage exclusively to one school of medicine, which by a bigoted, dogmatic, and monopolizing course, has foisted itself into notoriety, and lives, with all its errors and follies, at the public expense. We greatly mistake the spirit of reform in Michigan, if such a reproach to progress and justice long remains to tarnish her fair fame.

Yet, in looking carefully over the list of students and preceptors, it is very mortifying to find the names of several who claim to be believers in and practitioners of homœopathy. There must be an unaccountable obtuseness in the minds of these men, that they should thus willing pay tribute to a system so antagonistic to all they believe and practice. There can be no hope of ever relieving the State of this incubus, so long as the practitioners of our school continue to send their students there. Because Ann Arbor is nominally a free school, our young men are allowed to go there, and sit under the teachings of obsolete and erroneous doctrines, and to listen to the pointless raillery and stale sarcasm of homœopathic truths, daily served out with as much regularity as lessons in anatomy. If indeed a hundred dollars is saved to the student by attendance on lectures there, he will find in the end that it is the dearest economy he ever practiced. Two full courses of lectures in a school where the student can be thoroughly taught the truths of the homœopathic art is none too long to fit him for a practice whose nosology does not constitute a ready-made diagnosis, and whose prescriptions are not to be obtained, ready-made, for one dollar per volume. W.

Cleveland, O.

CHICAGO MEDICAL UNIVERSITY.

It is a promising sign of the times, and of the rapid progress of Homœopathy, especially in the North-West, that a *University* should be organized wherein the true healing art shall be taught. Chicago has the honor of having the first Homœopathic University established in the United States. Commencing with a large Faculty, composed of ten Professors, all of whom are well known to the profession as able teachers and authors in their respective branches, the Institution

cannot fail of success. Some of the Chairs are new to a Homœopathic College, namely, "Military Surgery," "Microscopical Anatomy," and "Medical Botany and Pharmacology." These latter branches form a part of the Chair of Materia Medica, and the incumbent, Prof. E. M. Hale, will undoubtedly do justice to the two branches of medical education quite too much neglected by our school. We understand that owing to a prior claim which the University holds on Prof. Hale, —a claim made during its inception last Spring—that gentleman will resign his position in the Cleveland College. It was not the intention of the founders of the University to organize the Institution this year; but it became evident that it was imperatively necessary to the well-being and prosperity of the Homœopathic School at the North-West that the University should go into operation at an early day. Under these circumstances the Faculty was appointed and the organization perfected. When Prof. Hale accepted the Chair of Materia Medica in the Cleveland College it was not supposed that that University would be organized until another year.

We have now in the United States five Colleges and one University devoted to the teaching of Homœopathic medicine and the collateral branches of science. Homœopathy ought to be represented in the Michigan State University, and will be, if every physician of the State works earnestly for that purpose.

[Since the above was in type, we learn that the Faculty of Chicago Medical University has been re-organized, and uniting with Hahnemann Medical College, will sail under the old charter.]

AMERICAN MEDICAL ASSOCIATION.

The annual meeting of the American Medical Association, in this city was attended by five or six hundred doctors. The sessions were interesting to the profession; and a well-deserved compliment was bestowed upon Dr. D. H. Storer of this city in electing him President for the ensuing year. The city government showed the Association every possible attention, an excursion down the harbor, with a dinner at Long Island being a part of the programme. According to the statements of many who were present, the amount of liquor furnished and drank upon that excursion could not have been taken with safety, except under the strong "medical advice" of the party.

We cannot refrain from remarking that the Association gained no credit for its insulting reference to homœopathists. Secretary Seward and the very respectable portion of our community who prefer that mode of practice, have a right to decent politeness at the hands of

"regular practitioners," and it simply argues weakness on the part of the Association, if it has no other arguments than sneers and insults. To characterize the "course of the present surgeon-general (Barnes) in consulting with a homœopath in the case of Secretary Seward and allowing a quack to prescribe medically whilst he was attending surgically, an offense of no mean proportions, the high position of the parties making the demoralizing effect the greater," is simply ridiculous.—*Boston Congregationist*.

MONTREAL HOMŒOPATHIC MEDICAL DISPENSARY.

Extract from First Annual Report.

It must be a matter of encouragement to the originators of this institution to learn that over three hundred individuals have already availed themselves of the benefits it aims to extend to the suffering poor. This is a degree of success the most sanguine Homœopath could scarcely anticipate, considering that few among the class the Dispensary is designed to reach know anything of the Homœopathic treatment. The relief obtained in some cases has induced the individuals to seek re-admission for the treatment of other diseases, and the remarkable cures effected in other instances, have undoubtedly made a favorable impression wherever the cases became known. The number of patients is gradually becoming larger each month. The institution is greatly indebted to JOHN WANLESS, M. D., for his gratuitous services and for the regularity and punctuality with which he has attended.

The number of patients has been 303, and the number of prescriptions about 750.

CANADIAN LICENSES GRANTED.—The following we find in the *Canadian Official Gazette*:

His Excellency, the Governor General has been pleased to grant licenses to Moses Edward Tripp, of Ingersoll, Esquire; Allan Napier Tisdale, of Otterville, Esquire; Peter McDonald, of Ingersoll, Esquire; and Lambert Ferguson Crawford, of Ingersoll, Esquire; to enable them to practice Physic, Surgery and Midwifery, under the Provisions of the forty-first chapter of the Consolidated Statutes for Upper Canada, entitled "An Act respecting Homœopathy."

Miscellany.

HAHNEMANN'S ORGANON.*

There has recently been issued in Germany, from the private press of Mr. Arthur Lutze, of Coethen, and under his editorship, what purports to be a sixth edition of the *Organon* of Hahnemann, with additions from the pen of Hahnemann and with annotations from the Editor, Mr. Lutze.

This alleged "Sixth Edition of Hahnemann's '*Organon*'" thus edited and printed by Mr. Arthur Lutze, appears to contain unwarranted alterations from the original text, as Hahnemann left it, together with suppression of important parts of the text. And these changes are of so important a character, that the editors of all the homœopathic periodicals of Germany, differing widely as they do on many points of doctrine and practice, have united in a solemn and earnest protest against the reception of this edition of the *Organon* as authentic. In this protest they earnestly beseech all homœopathic physicians throughout the world, and especially all societies, institutes and organized bodies of homœopathic physicians, after due investigation of the subject, to unite with them.

The object of this memorial is to lay before the profession this unanimous protest of the German homœopathic press, and in connection therewith, to present likewise such additional history and testimony bearing on the subject as may be necessary to a full comprehension of it.

The protest of the German press appears in the following words in the *Allgemeine Homœopathische Zeitung*, Vol. 70, 15, April 10th, 1865.

PROTEST.—In view of the fact that Mr. Sanitaets-Rath, A. Lutze of Coethen, has undertaken to publish a sixth edition of S. Hahnemann's *Organon* of the Healing Art, the undersigned, in the interest of their science and as the present representatives of the German homœopathic press, feel it their duty to make the following explanation.

Homœopathy has always excited the interest of the laity in a far greater degree than any other system of medicine, and to this very interest it is largely indebted for its extension and recognition. Even now, many places, in which the number of its representatives is far

* A memorial to the American Institute of Homœopathy and all Homœopathic Societies, Physicians and Journals.

from corresponding to the needs of the public who confide in it, are dependent upon practitioners who are not regularly educated physicians, (Nichtaerzte) and whose true devotion to Homœopathy must in part compensate for their lack of a scientific study of it. It would be ungrateful to wish to conceal this fact and not to lay aside all spirit of caste and recompense, with the most public recognition, the services of very many of these persons in the matter of the propagation of Homœopathy.

But it is no less true, that there are limits within which an active and independent participation by laymen and dilettanti becomes an impossibility, unless it should reduce science to a piece of mechanism and make the healing art a handicraft. It is the duty of every honorable representative of Homœopathy to keep a zealous watch, to the end that no unqualified hand grasp and jostle its inner sanctuary, whether it be the hand of an opponent or of an adherent.

The *Organon*, this work of Hahnemann's which comprises the collected principles of Homœopathy and establishes them on scientific bases, has already, with great propriety, been called the Bible of Homœopathy. A new edition of this work which, it is well known, has long been out of the book trade, must be a welcome circumstance to every Homœopathician. But assuredly, every one will also be constrained to ask, how comes Mr. Lutze to undertake this honorable duty? And still more, how comes Mr. Lutze to introduce this new edition of Hahnemann's work with *his own name* upon the title-page, since assuredly he can have exercised no function but simply and purely that of a publisher and bookseller? But this reasonable question is completely silenced in the face of an incomparably more important and weighty fact, which nothing short of a complete misapprehension of his own position and the greatest self-conceit on the part of Mr. Lutze could have rendered possible.

Lutze has permitted himself not only to add to Hahnemann's work a new and emphatic dedication and several additions in the way of annotations and an appendix, but has even removed several paragraphs of Hahnemann's (272—374 of the fifth edition) and has substituted for them a new paragraph which expresses directly the opposite of what was heretofore said therein, and he has, by so doing, deliberately and without any right, annihilated one of the cardinal principles of Homœopathy.

The annulled paragraphs contain the precept, that in homœopathic practice, *only one single simple remedy should be given at one time* to the patient; they contain the reason for this precept and moreover an impressive warning against the danger of ever combining remedies. Instead of all this, the paragraph which has been smuggled in sanctions the administration of the so-called double and triple remedies for certain alleged cases. Every one who is only tolerably familiar with Homœopathy must know that the exclusive administration of simple and uncombined remedies is one of the three principal pillars on which the entire edifice of Homœopathy rests. To take this away means nothing less than to entirely overturn Homœopathy.

And how does Mr. Lutze justify this outrage, or at least cloak it

with the semblance of a title? In this way. He perpetrates a falsification of history and he confounds with one another, circumstances that occurred in former years, in that he appeals to a letter of Hahnemann's written in 1833, from which it appears that Hahnemann, at the instance of Dr. Ægidi, had for some time been ready to introduce into the fifth edition of the *Organon* a paragraph in favor of "double remedies."

But, in order to a right understanding of this circumstance and in justice to the history of Homœopathy and to the name of Hahnemann, it should not be concealed that, upon the unanimous representations of his followers, Hahnemann immediately reconsidered this momentary weakness towards a dear friend, and that he not only did not introduce the unwholesome paragraph into the said fifth edition, but even considered it his duty to repeat, more impressively than ever, the before mentioned warning against combining remedies. And in this conviction he remained true and firm; for up to the day of his death, ten full years, he did and published nothing which could be alleged as bearing against this claim. But can any one, who has any knowledge whatever of Hahnemann's character, suppose for an instant, that he could be turned back by any but the most conclusive reasons, or that, for the space of ten years, he would have failed, through hesitancy or indecision, to recall this fifth edition, if he had been really convinced of the correctness of other views than those therein stated? No! Hahnemann, that Iron-Head, was not the man of cowardly compliance or of passive sufferance who would have let that befall, in regard to his own Homœopathy, which he did not hold to be the right! And now, twenty-two years after his death, there comes an officious, meddling fellow, who would make us believe, as though he had only soft heads and neophytes to deal with, that Hahnemann had "like Saturn, devoured his own children."

Have we then said too much, when we speak of falsification of history and of a perversion of the facts? Truly, even were Lutze quite another than in fact he is, we should be compelled to fling in his face the charge of the boldest assumptions, the most unheard-of self-exaltation and of falsification, and without mercy tear him down from the dictatorial chair which he has usurped. He, least of all, is the man who should offer to do such things. Out of such timber may indeed be hewn lubbers for the masses who are incapable of reflecting and of calling to account, but never the reformers of medicine!

In view of these facts, we, the representatives of the scientific Homœopathic Press of Germany, hereby solemnly protest against this alleged sixth edition of Hahnemann's *Organon*, and we declare the same to be spurious and apochryphal, and at the same time we repudiate all fellowship with such conduct, and with its perpetrators, and we denounce it and them. Confident of the entire support of all the true representatives of Homœopathy, we anticipate, first of all from all parts of Germany, and from foreign lands, from individuals and from societies, a formal concurrence in this protest, and we anticipate with more especial confidence from the Central Union of the Homœopathic Physicians of Germany, that, at its next meeting, it will adopt

more positive regulation against such compromisings of Homœopathy and will go to work energetically against all spoilers of our science.

(Signed)

DR. BOLLE, *Ed. Hom. Pop. Zeitung*,

DR. HIRSCHL, *Ed. Zeit. für Hom. Klinik*,

DR. MEYER, *Ed. Allg. Hom. Zeit.*,

DR. C. MULLER, *Ed. Hom. Vierteljahrschrift*.

In order that the allusion in the above protest to Hahnemann's "dear friend," Dr. Ægidi, as well as the documents which are to follow, may be more clearly understood, a few words of a historical nature may here be introduced.

Mr. Lutze published in 1860 a popular "Manual of Homœopathic Theory and Practice for Domestic Use." A translation of it by Dr. C. J. Hempel was published in New York, in 1863. In this Manual Mr. Lutze authorizes the use of two or even three drugs, *in combination*, in one and the same dose. He claims to have for this practice the sanction and encouragement of Hahnemann, Ægidi and von Boenninghausen. His language is as follows:

This important discovery of the combination of drugs was first announced twenty-four years ago by Dr. Julius Ægidi, at that time Physician to the Princess Frederica of Prussia, and now Medical Councillor. This discovery was communicated to Hahnemann in the year 1833, corroborated by 233 cures with combined remedies, and was joyfully received by Hahnemann, but kept secret from the public by the imbecility of the foes of truth, whereas the worthy discoverer was insulted and derided by those who were unworthy of unloosing his shoe-strings.

Mr. Lutze then gives a letter from Hahnemann to Ægidi, dated May 15th, 1833:

*Dear Friend and Colleague:—*Do not suppose that I reject anything good from mere prejudice or because it might lead to modification in my doctrine. All I desire is truth, and I know that this is all you care for. I am rejoiced that you should have had such a happy thought, at the same time confining its execution to proper limits. Two remedies should only be given in combination, in a highly potentized form, provided each is, in its own way, homœopathic to the case. In such a case, this proceeding is an advantage to our art which should not be repudiated. *I shall take the first opportunity of making a trial, and I doubt not it will be successful* I am likewise glad to hear that Boenninghausen approves of this plan.

Lutze proceeds:

In another letter to Dr. Ægidi, Hahnemann writes, under date of June 19th, 1833: I have devoted a special paragraph to your discovery of a combination of drugs, in the fifth edition of my *Organon*, the manuscript copy of which was last night sent to Arnold, etc.

Lutze goes on to say:

What has become of this paragraph? We search the *Organon* from beginning to end without finding it. Here is the explanation. Hahnemann laid the new discovery, which he had kept secret heretofore, before the meeting of homœopathic physicians of the 10th of August, 1833. Their number was as yet small, but instead of meeting with open hearts he found stubborn minds, who, instead of accepting the blissful truth, assailed it with all sorts of persecutions, comparing it to the mixtures of allopathic practitioners, and persuading Hahnemann to abandon the publication of this discovery and to allow one of his friends to suppress the paragraph which had been printed.

He proceeds to say that Ægidi was shamefully abused and that he preferred to remain silent, rather than expose himself to abuse and assaults. He adds:

I do not know the persons who have perpetrated this robbery; most of them may be in their graves. The time for requital has come; the hitherto suppressed discovery rises like a phoenix from its ashes and the name of its author, Julius Ægidi shall be snatched from oblivion. * * Three or four years ago the discoverer first acquainted me with the combination of remedies. *

* * Our excellent Boenninghausen has informed me orally that he has obtained equally fortunate results, etc.

It will be seen that Mr. Lutze defends his use of combined drugs by the testimony of Drs. Ægidi and von Boenninghausen—strong names, certainly. But it so happens that Dr. Ægidi, who is still living, had already placed himself on record in terms which directly conflict with the above statements of Mr. Lutze, while a letter quoted below from Dr. von Boenninghausen to your memorialist is equally conclusive, touching the decided disapproval with which the practice of combining drugs was regarded by Dr. von Boenninghausen, who moreover intimates, by the way, that he does not know and has never met Mr. Arthur Lutze.

May 12th, 1857, Dr. Ægidi published in the *Allgemeine Zeitung* an explanatory note, disavowing and disapproving the practice of combining drugs. Yet, in the face of this disavowal, Mr. Arthur Lutze, in 1860, hails Ægidi as the discoverer of the method and thereby claims "to snatch his name from oblivion."

Now again, April 12th, 1863, on seeing the Protest of the German Homœopathic Press against Lutze's edition of the *Organon*, Dr. Ægidi publishes a second card in the following language (from the *Allg. Hom. Zeitung*, 70, 17, 136, April 24th, 1865):

EXPLANATION.—The protest of the honored representatives of the homœopathic press of Germany against the alleged sixth edition of the *Organon* of the Healing Art, published in the *Allg. Hom. Zeitung* of April 10th, Hahnemann's birthday, having embraced the mention

of my name, yet having omitted to mention that I also participate in the conviction in behalf of which the signers of the protest contend—that, years ago, I loudly and publicly made known my disapproval of the administration of so-called double remedies, as an abuse and a mischievous proceeding—I find myself compelled to publish my explanation as it originally appeared in the *Allg. Homœopathische Zeitung*, 54, 12, May 19th, 1857, and thence was copied in the *Neue Zeitschrift für Homœopathische Klinik*, II, 12, June 15th, 1857. It was in the following language:

“The undersigned finds himself compelled to join his voice in the reproaches that have been made, particularly of late, against the homœopathic administration of so-called double remedies; so much the more, inasmuch as it is he who is charged with having taken the initiative in this mode of acting which is the subject of reprobation. Entirely agreeing with all the arguments adduced against it by competent persons and the refutation of which must be impossible, the undersigned is compelled to make known publicly and emphatically his decided disapproval of such an abuse of our excellent and most serviceable art, as has been lately recommended in an apparently systematic manner and as a rule; to the end, that persons may forbear to take his supposed authority as a sanction of a mode of treatment which, even as he (*Stapf's Archives*, 1834, 14.) thought he might recommend a modification of it for very rare and exceptional cases, is very far from being the abuse and mischief which it is now made and being made.”

I add to this that I thoroughly agree with the contents of the above-mentioned protest; and that, in my opinion, the practice therein rebuked is not dealt with even as severely as in the interests of our science, it should have been. ÆGIDI.

Freienwald, a. d. O. April 12th, 1865.

When the American translation of Lutze's Manual appeared in 1863, your memorialist wrote, under date March 2d, to Dr. von Bœninghausen, quoting the passages which refer to him, and asking to be informed on the subject. The following reply was promptly received:

MÜNSTER, March 25th, 1863.

To DR. CARROLL DUNHAM, New York:

My Very Dear Friend and Colleague:—I have just, to-day, received your letter of the 2d inst. The passage which you quote concerning the “combined doses, containing two different remedies,” imposes on me the duty of replying without a moment's delay.

It is true that during the years 1832 and 1833, at the instance of Dr. Ægidi, I made some experiments with combined doses, that the results were sometimes surprising, and that I spoke of the circumstance to Hahnemann, who after some experiments made by himself, had entertained for a while the idea of alluding to the matter in the fifth edition of the *Organon*, which he was preparing in 1833. But this novelty appeared too dangerous for the new method of cure, and it was I who induced Hahnemann to express his disapproval of it in

the fifth edition of the *Organon* (1833), in the note to §272. Since this period, neither Hahnemann nor myself have made further use of these combined doses. Dr. Ægidi, too, was not long in abandoning this method, which resembles too closely the procedures of Allopathy, opening the way to a relapse from the precious law of simplicity—a method, too, which is becoming every day more entirely superfluous, from the augmentation of our *Materia Medica*.

If, consequently, a Homœopathician takes it into his head to act according to experiments made thirty years ago, in the infancy of our science, and subsequently rebuked by unanimous vote, he clearly walks backwards, like a crab, and shows that he has not kept up with nor followed the progress of science.

Supposing that it may interest you to know the origin of the above-mentioned method, I add the following: There was about this time (1832 and 1833) at Cologne, an old physician named Dr. Stoll, himself a constant invalid and hypochondriac, who, distrusting the old medical doctrine, but having only a superficial smattering of Homœopathy, had conceived the idea of dividing the remedies into two classes, the one of which should act upon the body, and the other upon the soul. He thought that these two kinds of medicine should be combined in a prescription, in order to supplement each other.

His method making some noise in Cologne, and Dr. Ægidi, then at Dusseldorf, having in vain endeavored to discover the essential secret of its novelty, the latter induced me to endeavor to find it out. I succeeded in doing so. Although the idea of Dr. Stoll was utterly devoid of foundation, it nevertheless induced us to make experiments in another way, namely, that above recited, but which, as I said before, was utterly rejected long, long ago.

You will see by the *Allgemeine Homœopathische Zeitung* that Mr. Lutze offers to sell his establishment at Coethen and move to Gotha.

* * * * *

(Signed),

Yours very sincerely,

C. VON BÖENNINGHAUSEN.

It thus appears, even from Hahnemann's own letter to Ægidi, which is the only authority Lutze had, in 1860, for claiming Hahnemann's approval of this practice, that Hahnemann only *promised* to "take the first opportunity of making a trial," and although he subsequently spoke of a purpose to allude to the subject in his *Organon*, he nowhere states that he *did* make successful trials. But he *does* state that he "would not reject anything good from mere prejudice." From the fact, then, that he *did* reject this method, and that he concluded not even to allude to it in the *Organon*, we are forced to the conviction that he did not regard it as "anything good."

Moreover, Ægidi, its reputed author, and Boëninghausen, who is alleged to have favored it, are most emphatic in its reprobation.

The Homœopathic Medical College of Pennsylvania having carefully considered the subject, has issued the following Protest:

A PROTEST.—At a meeting of the Faculty of the Homœopathic Medical College of Pennsylvania, the following Preamble and Resolutions were discussed and unanimously adopted :

Whereas, A book, purporting to be the sixth edition of Hahnemann's *Organon* has been published at Coethen, Germany ; and

Whereas, The representatives of Homœopathic Journalism in Germany have issued their earnest protest against this unwarranted sixth edition of said work and have *pronounced and declared it to be mutilated and perverted*, in that the paragraphs numbered 272—274 in the fifth edition of said work, treating on the simplicity of the remedy to be administered, have been omitted and spurious and false ones have been inserted in their place, recommending double and triple mixtures :

Resolved, That we fully endorse the Protest published in Vol. 70, No. 15 of the *Allgemeine Homœopathische Zeitung*.

Resolved, That we protest against the introduction of any translation into English of any spurious and false edition, as a standard work of Homœopathy.

Resolved, That we call the attention of the American Institute of Homœopathy, at its next meeting on the 6th *proximo*, and of all other State and County Homœopathic Societies to the above Protest ; and that we solicit their co-operation in endeavoring to protect our science from perversion by false and spurious interpolations into its standard literature.

Resolved, That we request this, our protest against said book, to be published in all the American, British, German, and other homœopathic journals, and a copy thereof to be transmitted to each of the State and County Homœopathic Societies in the United States.

In testimony whereof, we have hereunto affixed our signatures, this twentieth day of May, A. D., 1865.

CONSTANTINE HERING, M. D., *Prof. of Inst. and Prac.*; ADOLPHUS LIPPE, M. D., *Prof. of Materia Medica* ; H. N. GUERNSEY, M. D., *Prof. of Obstetrics* ; CHARLES G. RAUE, M. D., *Prof. of Pathology* ; GEORGE R. STARKEY, M. D., *Prof. of Surgery* ; PUSEY WILSON, M. D., *Prof. of Anatomy* ; J. H. P. FROST, M. D., *Prof. of Physiology*.

In view of these facts, your memorialist prays the American Institute of Homœopathy and all homœopathic societies, as well as the homœopathic press, to give the weight of their name and authority in behalf of the purity of our doctrine and literature by joining in the unanimous protests of the German Homœopathic Press, of distinguished German physicians and of our oldest American Homœopathic College, against this unauthorized, alleged sixth edition of Hahnemann's *Organon*, by Mr. Arthur Lutze, of Coethen.

New York, June 1st, 1865.

CARROLL DUNHAM, M. D.

APPENDIX.—The following documents from the *Allg. Hom. Zeitung*,

70, 18, May 1st., 1865, were received too late to be incorporated in the above memorial. D.

The Society of the Homœopathic Physicians of Austria for Physiological Drug-Provings, having received at its general meeting in Vienna, April 10th, 1865, the protest [of the German Homœopathic Press] against the sixth edition of Hahnemann's *Organon*, undertaken by Dr. Lutze, of Coethen, has carefully weighed its purport and has adopted the following resolution:

"That the said Society fully agrees in the above-mentioned protest, and that it authorizes its two representatives, viz: the President, Dr. Ph. Ant. Watzke, and the Editor, Dr. Martin Eidherr, to sign the same in the name of the Society "

(Signed) *The Society of Austrian Homœopathic Physicians for Drug-Provings.*

DR. PH. ANT. WATZKE, *President.*

DR. MARTIN EIDHERR, *First Editor.*

The undersigned [Hungarian Homœopathic Physicians] give our unqualified adhesion to the protest against the sixth edition of Hahnemann's *Organon* issued by Mr. Lutze, of Coethen.

DR. ARGENTI,	DR. PAUL V. BALOGH,	DR. T. BAKODY,
DR. HAUSEMANN,	DR. T. V. BALOGH,	DR. A. V. SZONTAGH,
	DR. M. SZENT KIRALYI.	

Pesth, April 20th, 1865.

LETTER FROM MADAME HAHNEMANN TO THE EDITOR OF THE ALLGEMEINE HOMŒOPATHISCHE ZEITUNG.—*Most Honored Doctor:* To my extreme surprise I learn from No. 14 of the *Allg. Hom. Zeitung*, of April 3d, 1865, that Dr. Lutze, of Coethen, and Dr. Suss, of London, announce the publication of a sixth, much improved and enlarged edition of the *Organon* of Hahnemann.

No one, save myself, has the right to publish the sixth edition of the *Organon*; I alone possess the manuscript of this important work, written by my husband's own hand; to me, alone and exclusively, were confided the improvements which the author made in the *Organon*.

Dr. Lutze both never saw Hahnemann and never stood in any connection with him.

Dr. Suss, of London, saw Hahnemann twice; first as a child, six years old, and subsequently, when a student in Leipsic, at the eve of my husband's death; it is therefore impossible that he could have received from him anything new in relation to Homœopathy.

Now, when others give out that they know something new, when they would make, as it were, a romance out of our sacred *Organon*, now is the time to publish the genuine and true *Organon*, and I will give it to the press.

As we may not alter, omit nor add anything to the Holy Gospel nor the other Holy Scriptures, so neither may we presume to make any change in the *Organon*, the codex of human health; it must

remain as its author created it, and it must appear only in its pure, unadulterated truth and genuineness.

I earnestly entreat you, respected Sir, to allow this letter to appear in the next number of the *Allg. Hon. Zeitung*, just as it is, without any alteration.

Your adherence to the true principles of our beneficent science, and your sense of justice will assuredly guarantee me this favor, for which I already thank you beforehand, in my own name and in the name of the true disciples of Hahnemann.

Receive, most esteemed Doctor, the assurance of my most distinguished consideration.

(Signed)

M. HAHNEMANN, 54 faubourg St. Honore, Paris.

For American Homœopathic Observer.

MULTUM E PARVO.

It is very amusing, as well as instructive, to attend a literary, scientific, or religious convention, where men are forced together in close mental contact. It constitutes a sort of market to which the participants bring their wares, and offer them, as it were, for sale. And as in a commercial market, so here, the quality, character, value, and display of the goods present a very wide contrast. A recent attendance on several medical conventions has given me ample opportunity to study the phases of the market, and I have been struck by no one thought more than this, How much some men can make out of a small capital. The market is no sooner declared open, by the presiding officer, than one or two industrious fellows begin a gaudy display of their wares. Their whole front is overhung by a few showy articles, and they lose no opportunity in calling the attention of all persons present to their very extraordinary goods. And if you happen to meet them, subsequently, at some other convention, identically the same wares are put out for exhibition. A few more samples of the same sort is still their cry. For illustration, two or three good surgical cases are sometimes capital enough for a whole season. The proprietor only needs to get up a few cheap cuts, or have prepared some morbid specimens of anatomy, to be carried around, and when they are duly exhibited, with eloquent and learned words, the scene is highly impressive, and succeeds in making the "country doctors" in convention stare in earnest. But when you have met these savans in three or four conventions in one season, and heard them rehearse the same story, and display the same specimens, you will understand the secret of making much out of a little.

But these industrious tradesmen go still further. Having gone

the rounds of the medical societies, they forthwith commit the whole thing to print; and their ambition is not sated until the pages of three or four different journals are graced with their pet story. Now if one attends all the conventions,—and there are very few physicians that do either—they will see into the mystery of *multum e parvo*. But to the many who attend but one, or no convention, and take but one journal, it seems a marvel indeed how one head can contain so much.

I hope it will be distinctly understood that I am explaining and not condemning the process. To be naturally endowed with a limited amount of mental capital is no shame to any one, but to make that limited capital vastly more productive than the larger and unemployed possessions of other men, is certainly praiseworthy. If, however, any object to the method here described, the objection is perhaps worthy of consideration. It is far from being desirable, to see in such conventions, men of age and experience, whose heads are full of rich thoughts, and who seldom give utterance to an idea more than once, sitting quietly and unemployed, because overawed and silenced by young men whose talkative and demonstrative manner admit of no competition.

But still, one can't help admiring the readiness and ease with which a few gifted souls eke out their scanty material into such a form that surface and sound make full amends for lack of depth and wisdom. It requires a marvelous amount of industry and energy, worthy of all imitation, to accomplish what is here not inappropriately termed *multum e parvo*. W.

For the American Homœopathic Observer.

LIFE INSURANCE COMPANIES.

BY C. T. HARRIS, M. D.

In the last No. of the OBSERVER I noticed a movement in the right direction, by the officers of the "London Life Assurance Company." And every "live" Homœopathic Physician will testify to the fact that it would be a matter of economy and simple justice for every such Company to fix a lower rate of premium for persons treated by the Homœopathic system. We know the rate of mortality is far less with persons so treated, and yet many if not all of our organized Companies refuse to appoint Homœopathic practitioners as examining physicians for said Companies.

Not long since a gentleman of our village was solicited to become agent for a Company (I think the "Charter Oak"). He consented,

provided he could have a Homœopathic practitioner as Examining Physician. The answer was, "*Our Company do not employ Homœopaths as Examining Physicians. I do not doubt the ability of such Physicians, but such is the decision of our Company.*" The gentleman being a true Homœopath, declined the appointment.

And now, Mr. Editor, *are we to lie under this ostracism* while our friends pay high rates of premium for *Allopathic mortality*? Can you, sir, tell us of any Company not thus under the control of *Allopathic prejudice* and ruled by Allopathic physicians? What say you and your readers to a Company organized by Homœopaths, with Homœopathic officers and with rates of premium adapted to Homœopathic tables of mortality, with higher grades for others? A Company thus organized would be, if successful, a strong and truthful argument for the superiority of Homœopathic over the Allopathic practice of medicine. Let us have such a Company. What say you?

[The Mutual Benefit Insurance Co., of Newark, N. J., and the United States Life Insurance Co., of N. Y. City, both employ Homœopathic physicians as examiners, and we believe many other Companies do the same.]

For the American Homœopathic Observer.

Another Freak of Nature.

BY T. C. FANNING, M. D.

Dr. Williams' report of a "freak of nature," reminds me of a similar case, which I saw while in college.

Dr. MOTT, in his regular course of lectures, was about to illustrate his famous operation, ligation of the innominata. He had made the usual incisions and was feeling for the artery, when he stopped, rather perplexed, and after announcing to the class that some abnormal distribution of the arteries prevented the illustration of the operation in that subject, he proceeded to some other illustration. Subsequent dissection showed that the heart, in that person, was on the right side of the thorax, and I think the innominata was found on the left side. The thorax, with the heart and vessels in situ, was preserved and set up in Dr. Mott's portion of the College Museum, where I presume it may still be seen. The College to which I refer is the New York University, Medical Department.

WANTED, at Winchester, Ills., a good Homœopathic Physician. For particulars, address JAS. CHESELDINE, Winchester, Ills., or Dr. S. A. MERRELL, Independence, Mo.

Practice of Medicine.

NOTES FROM PRACTICE.

BY WM. H. HOLCOMBE, M. D., NEW ORLEANS, LA.

SCIATICA.—I was called to a middle-aged woman, who had been treated for sciatica by two of the most distinguished Allopathic physicians of New Orleans. She had been bed-ridden for three months. She had never experienced any relief except a temporary suspension of pain after the sub-cutaneous injection of Morphine. Mercury, Iodine, Potash, Colchicum, Quinine, tonics, blistering, &c., had been exhaustively employed. The pains seemed to start from around the left hip-joint, and extended from the thigh into the foot in violent paroxysms. These paroxysms are always excited by attempting to sit up in the bed. She could not assume that position a moment without her thigh bone “cocking up,” as she expressed it, with a jerk and darting pain of indescribable agony. She complained very much of a sense of swelling almost to bursting in the leg and foot. The limb was constantly cold and blue, notwithstanding the stimulating liniments which had been used, and the flannel bandages in which it was continually enveloped. I removed all these, and made use of no external applications. I gave her *Colocynth* and *Rhus-tox.*, 1st centesimal dilution, about one drop at a dose, alternately every two hours, only in the day-time. In two days she was vastly better. I continued the same medicines at intervals of four hours. I gave nothing else whatever, and in two weeks she was perfectly well, attending personally to all her household affairs. It has been four months, and there has been no indication of a relapse. That looks something like a reliable cure.

CHRONIC ULCERATION OF THE BOWELS.—A lady, aged about fifty, had been affected for six months with painful diarrhoea, attended by progressive emaciation, prostration, &c.; the stools being always mixed with purulent matter, and sometimes with blood. There were

from six to ten evacuations in the twenty-four hours—several of them generally consisting of nearly a teaspoonful of mucus and pus. Sometimes a thick coating of purulent matter surrounded the rolls or lumps of semi-solid fæces. There was great tenesmus, nervous palpitation of the heart, and mental depression. I treated her for two months with but little result, save the relief of the tenesmus and a slight diminution in the frequency of the stools. Amongst the remedies tried were: Mercurius, in different forms, Arsenic, Sulphur, Colocynth, Aloes, Podophyllin, Leptandrin, and injections of opiated solutions of zinc and copper. I studied out the case afresh, and determined to give *Graphites*. Recollecting also that *Cod-Liver Oil* is an admirable application for external ulcers, and seemed called for as a nutrient by the anæmic and cachectic state of the patient, I concluded to prescribe one grain of *Graphites*, 1st centesimal trituration, three times a day, in a teaspoonful of *Cod-Liver Oil*. The patient began to improve in a few days, and at the expiration of a month was perfectly well; had fattened considerably, stools healthy, and rather constipated than otherwise. Three months have passed away and there has been no relapse. I am confident this prescription is worth recollecting.

A curious fact in the history of this case should be recorded. The lady was vaccinated with bad virus about a year ago, had a horrible arm, and afterwards a large abscess on the right side of the body below the mamma, which discharged profusely. It was cured hastily by styptic injections, and the morbid condition of the bowels developed itself soon afterwards.

INCIPIENT PARALYSIS.—Without entering into the symptomatology or diagnosis of these very complicated and obscure diseases, I will state the broad outlines of three cases of paralytic disease, all of which have been considerably benefitted by the same treatment:

Case 1.—Young lady, about twenty-five, bed-ridden for three years, with uterine tumor and difficult menstruation; subject to violent congestive headaches, always with cold skin, imperfect digestion, and frequent dribbling of urine. No stool without enemas. Inability to stand or use the lower limbs; great weakness in the use of her arms; unable to rise up in bed or to keep the sitting posture unsupported. Platina, Sepia, Glonoine, Kalmia, Coffee, and some other remedies were occasionally interposed for the headache and menstrual difficulties, but the steady treatment for the paralytic symptoms was one grain of *Argentum-nitricum* 2d centesimal trituration, every morning, and one grain of *Plumbum-met.*, 1st centesimal, every night. Duration of treatment, eight months. Result up to date: Her head-

aches are less frequent and severe ; she has stools with less difficulty, and sometimes without using enemas ; there is rarely any dribbling of urine ; she can stand upon one limb for some minutes, and she moves herself with more ease in bed, being able to sit up an hour or two at a time without trouble.

Case 2.—Married lady, aged thirty. Had not left her room, and rarely her bed, for three months. Complained of debility, prostration and great nervousness. Unsteadiness and trembling when walking ; powerlessness of the arms after using them, as in writing, sewing, grasping objects, &c.; obstinate constipation. All the other functions perfect. *Argentum-nitricum* and *Plumbum* as above. Duration of treatment, three months. Present condition much improved. She moves about her house with ease, and takes daily rides about the city in the street cars. Bowels less constipated ; arms stronger ; lower limbs firmer in their gait, and the whole system, physical and psychological, evidently improved.

Case 3.—Married lady, aged fifty, past the climacteric period, treatment with general paralysis, symptoms progressive for the last three years. Staggering gait when attempting to walk, especially with inability to lift the feet. Obstinate, at times almost insuperable constipation. Extreme weakness of the arms ; difficult deglutition, especially of water or liquids. Want of command over the voice, sometimes amounting to aphonia. Intense mental dejection. Allopathic tonics, frictions, baths, galvanism, &c., had all been used without effect. Gave her *Argentum-nit.* and *Plumbum*, as in the other cases. Duration of treatment, three months. Present state better—difficulty of deglutition almost entirely disappeared ; voice improved in strength ; bowels less constipated ; mind more cheerful. She walks ten or twelve squares every day, attends church, lifts her feet fairly and easily, although she is still very easily fatigued or depressed, and totters or staggers when she attempts to move faster. Before the paralytic symptoms came on, she was subject to terrible neuralgic headaches. She has not had the least pain in the head until within the last month, since which time a few fugitive stitches remind her almost daily of her old complaints.

In this entire class of cases I have little or no confidence in tonics, chalybeates, strychnine, electricity, or hydropathy. The grand metallic nervines, Aurum, Argentum, Plumbum, and Zincum, are my chief dependence. Admissible adjuvants in certain cases are, the internal administration of Cod-liver Oil, and frictions with a liniment composed of equal parts of the tinctures of Aconite and *Cimicifuga-racemosa*

IS THERE ANYTHING IN LACHESIS 30TH?—One of the most intelligent homœopathists I have ever known had a great contempt for Chamomilla, Pulsatilla, and Veratrum, which he declared were totally valueless. I think they proved so in *his* practice, because he gave them in five and ten drop doses of the mother tinctures. Lachesis, however, he denounced as a humbug, a farce, a perfect myth. He chuckled at the idea of there being anything in Lachesis 30th, with an incredulity which could have given Prof. Simpson, of Edinburg, a lofty opinion of his rational faculties. Well, try all things; hold fast to the good.

A lady, about the change of life, principal of a large public school, exhausted with study, business, and domestic troubles of all kinds, applied to me for something to quiet her system at night. She declared she had not had half a night's rest for six weeks. Feeling of intense weariness, worse in the morning; palpitation of the heart, with throbbing sensations in different parts of the body; confused thoughts; jactitation all night, with extreme nervousness, were her chief complaints. She was tall, thin, very sallow, coarse and dark-skinned, melancholy, irascible, of strong character and profound religious convictions. There was a metallic ring about the heart, and a jerking feel about the arteries. The animal sphere of her life appeared flagged from exhausted excitability and the vegetative sphere torpid. I gave her Lachesis 30th, one drop on sugar, every night on going to bed. She took nothing else; she did not know what she was taking; I directed no change in her diet; there was none in her habits, for she continued her school as usual. She took the medicine for twelve nights. She declared herself astonishingly relieved, said she rested well, and felt better generally than she had for months. That was three months ago, and she has made no complaint since. Was it a coincidence? Is Lachesis 30th, anything?

EXTERMINATION OF WARTS.—A gentleman brought me his little daughter, aged twelve years, whose hands were frightfully studded with warts. They had been repeatedly pared down close to the cuticle, and the base cauterized severely; but they always returned, and as he said seemed larger than ever. The best application to these excrescences is a mixture of Nitric-acid and Arsenious-acid, ten grains of the latter to one drachm of the former. I pared off the warts, not so close as to bring blood, or even to pain the nerves, and put a drop of the liquid on the fresh service—treating two or three of the warts in this manner every day. At the same time I gave her two or three grains of the carbonate of Magnesia, three times a day, for a month.

The warts all disappeared, the skin becoming as fresh and as smooth as ever. That was two years ago, and they have not returned. I was led to give the carbonate of Magnesia by the following extract from the "Epitome of Braithwaite," Vol. II., page 840:

"In the case of a girl affected with gastralgia, whose hands were covered with warts, Dr. Lambert gave carbonate of Magnesia. Two months after, though the stomach affection was unaltered, the warts had disappeared. In another case, the same dose, a teaspoonful night and morning, produced a similar effect in five weeks."

OBSTINATE HEADACHE FROM A DECAYED TOOTH.—I treated a young gentleman, last winter, for a terrible pain through the right temple, constant, but worse at night—nearly making him crazy. I exhausted my resources and his patience, after a month's trial on my part and suffering on his. In despair, I told him to have the upper back jaw tooth pulled. It was decayed, but not aching. In two hours after the tooth was extracted the pain ceased and has never returned. Was the true cause removed, or did the shock of the operation cure the disease?

SMALL-POX TREATED BY VERATRUM VIRIDE AND MACROTIN.—Small-pox I have always regarded as a self-limited disease, running a specific course, and very slightly modified by medicinal measures. I passed through a dreadful epidemic of it at Natchez, in 1863, and have seen a good many cases in this city in the last six months. Tartar-emetic, Causticum, Croton-tig., Mercurius-corrosivus, Thuja, and Variolin, have been my main-stays, and I have had every reason to be satisfied with my treatment, the mortality being very small; still the natural history and course of the disease has been pretty much that described in the books for the last hundred years. Lately I noticed that Dr. Wilkinson, of London, had great confidence in *Veratrum-viride* for small-pox; and remembering that Dr. Hill in his *Epitome*, and Dr. Smith, of Chicago, had recommended *Macrotin* in the warmest manner, I determined to alternate the two. I began on a very severe case. The constitutional symptoms were violent and the patient was thickly peppered with the eruption, although it was not confluent. I gave Macrotin, one-tenth of a grain, and Verat.-v., one drop of the mother tincture, alternately every two hours. The case went along very smoothly; the vesicles did not go on to full maturation; the great majority of them flattened rapidly, dried, and fell off. I had never seen so rapid a cessation of the disease before, nor so prompt a convalescence. I have pursued the same treatment in three more cases, all with the same result. It will take a vast amount

of evidence to prove that anything can abort the development of the variolous poison, but the above cases are certainly valuable. Nothing else whatever was employed, except bathing some portions of the skin in warm whiskey and water to relieve the intolerable itching, which is sometimes so distressing.

SANGUIS DRACONIS—OR DRAGON'S BLOOD.—Although scientific toxicology is the true basis of a philosophical materia medica, empiricism is a valuable handmaid to successful practice. The late Dr. Cartwright, of this city, was a man of rare learning, of subtle perceptions, and of that quick imagination without which there is no genuine strength or originality in any department of business. He once suggested to me a curious medicine, which I have found so valuable for several years in certain cases, that I feel it to be my duty to bring it to the notice of the profession. My wife had been suffering for eight months with the terrible chronic diarrhœa of the Mississippi Valley. The disease had at last been checked, indeed cured—but she was in a wretched, nervous, anæmic, debilitated condition. She was emaciated, sallow, listless, with no appetite or strength. Dr. Cartwright told me to put a teaspoonful of pulverized Dragon's Blood into a bottle of Maderia wine, and to give her a tablespoonful three times a day. The effect was magical; in two weeks' time she was blooming like a rose. "Dragon's Blood," said Dr. Cartwright, "has been laid on the Allopathic shelf as a feeble astringent, and it is sold in the shops as a paint. But it is really the most wonderful and subtle regenerator of the blood ever discovered. I give it where I used to prescribe Iron; but it is as much more ethereal, potent, and penetrating than iron, as spirit is than flesh. Its power resides not in its organic elements, but in its color, in its redness, which makes it a perfect analogue of hæmatin." Such was the doctor's enthusiastic statement and quaint theory.

I have since prescribed Dragon's Blood in scores, perhaps hundreds of cases—sometimes without result, but oftener with the happiest effect. I give it in anæmic and cachectic states of the system, during tardy convalescence from acute or exhausting diseases, in debilitated states of the body from excessive exertions, protracted discharges, &c. It almost always improves the appetite, imparts strength, gives color, and what is singular, it acts on the individual sensational and psychological sphere, in such a manner, that even when there are few organic changes to warrant the patient's report of himself, he is more cheerful and exhilarated, and generally declares that it is the grandest tonic he ever took in his life.

Sanguis Draconis is a concrete juice, resinous in its character,

from the *calamus draco*, a small palm tree of the Indian Archipelago. The form I have employed comes in cylindrical rolls, enveloped in palm leaves, and bound with narrow strips of cane. Dr. Cartwright said the *best* article came in little oval cakes—but I have not been able to procure it. An article in that shape, sold to me for pure Dragon's Blood, proved to be mere rosin, or resin of turpentine. Dragon's Blood is wholly insoluble in water, but readily so in alcohol. I have frequently made use of the tincture, but Dr. Cartwright's prescription, a teaspoonful of the pulverized resin in a pint of good Maderia wine can be scarcely improved upon.

PERMANGANATE OF POTASH.—I cannot refrain from adding my little testimony to the efficacy of a weak solution of the Permanganate of Potash as a gargle in ulcerated, diphtheritic, and scarlatinous sore throats; as an injection in gonorrhœa and leucorrhœa, as an application to cancerous surfaces, to cutaneous ulcers, to chronic abscesses and purulent collections and discharges of all kinds, and as a general disinfectant. I have never used more than one grain to the ounce, and less will often suffice. The crystallized salt is always to be employed.—*North American Journal of Homœopathy.*

HÆMORRHOIDS CURED BY *ÆSCULUS HIPPOCASTANUM*.

BY C. H. LEE, M. D.

I was called, a few months ago, to see a man, suffering intensely from hæmorrhoids. He could not sit in a chair, walk, nor lie on his back. The only way he was relieved was by lying on his face. The tumors, three in number, protruded out in the shape of ground nuts, about three-quarters of an inch in length, of a blue-purple color. There were sharp, shooting, cutting pains, through them, running up into the sacrum; severe aching pain in the back. He was always troubled with constipation, not having a passage from his bowels from three to four days, for a few years back. He is of a nervo-sanguine temperament.

I administered the crude tincture of *Æsculus Hippoc.*, a powder, to be taken every hour, until better. On taking the first powder, he exclaimed—"Oh! Doctor, that's the awfulest medicine I ever took." After taking the third powder, he sent word that he felt better. He continued taking the powders every two hours. In two days after, he was well and walking around town. His bowels since have become more natural and move every day.

I had also another case with the same symptoms, only much worse,

being very much prostrated and losing flesh. Gave him the same remedy and he was cured. In neither case has there been a return of the complaint.

ÆSCULUS HIPPOCASTANUM IN HÆMORRHOIDS.

BY DR. R. HUGHES.

In the last number of this journal, I narrated a case in which *Æsculus* had gone far to cure a case of painful hæmorrhoids of many years' standing. Since the publication of the above, I have heard again from the patient. She writes, "I have now taken the *Æsculus* as before," three drops of the 2d dilution in water twice daily, "for another month, and may fairly call myself well. I have no pain; and the protrusion is nothing but a flabby piece of skin. Should the symptoms ever return, I shall fly to the medicine, but I hope never to require it."

The two following cases illustrate its efficacy in the acute form of the disease.

1. Richard S—, æt 20, called upon me one day, stating that he had been suffering from piles for a week. The bowels were rather costive; but there was no bleeding. His health is good. I gave him nine drops of *Æsculus* 3, in three ounces of water, a dessert-spoonful to be taken three times a day. By the time he had taken half the bottle (*i. e.* in about thirty-six hours) all symptoms of piles had vanished and he discontinued the medicine.

2. Mrs. F—, æt. 60. Years ago was a martyr to hæmorrhoids. Each attack would last from six to ten months, during which time she could rarely leave the recumbent posture. Since adopting homœopathy, the bowels had acted with much greater regularity, and the hæmorrhoidal attacks had been absent. On May 22d I was called to see her. I found her in bed, suffering intensely from several large piles, which seemed quite to block up the rectum. The bowels had been confined for several days in the preceding week; and on the 20th the old hæmorrhoidal symptoms had supervened, and were increasing in intensity. There was little or no bleeding. She anticipated many weeks of suffering. I gave her a drop of *Æsculus* 3, every four hours. Next morning there was improvement rather than the reverse. On the 24th she was decidedly better. She said, "Are you giving me an aperient? my bowels are acting so comfortably." On the 25th she was well and about the house; and I took my leave.

These cases illustrate also the precise form of the disease for

which *Æsculus* is specific. When the piles are only secondary to existing portal or other intra-abdominal congestion, it will probably be inferior to Nux and Sulphur. When they are associated with symptoms of varicosis elsewhere, and bleed much, Hamamelis will be a better remedy. But when the only connected symptoms or appreciable cause is constipation, and there is much pain but little bleeding, *Æsculus* seems pretty likely to cure.—*British Journal of Homœopathy*.

CURIOUS INCIDENT.

MR. EDITOR :—The following curious incident lately fell under the observation of a friend :

A boy, seven years of age, was lying in bed, not long after the family had retired for the night, and was suffering very much from spasmodic breathing, as in an asthmatic affection.

A polecat or skunk having got under the house, (they are very plentiful hereabouts in the country, as are all sorts of wild animals since the war has not permitted them to be destroyed,) and having become excited by some of the domestic animals, the peculiar odor rose into the room very strongly, and completely arrested the difficulty in breathing, in a few seconds. An Allopathic physician who was attending him at the time, gave it as his opinion that the odor was certainly the cause of this sudden arrest of the morbid symptoms.

Will our medical brethren please note.

Yours,

S. A. M.

For the American Homœopathic Observer.

TREATMENT OF FELON.

BY C. EMORY MORSE, M. D.

I have for the last twelve or fifteen years applied the following ointment to felons, without a failure :

Take a teaspoonful of soft soap and bulk of a pea of good unslacked lime. Rub it to a salve ; apply it, with the head of a pin, to the spot affected. One application is almost invariably sufficient. Bad cases with bad treatment, I put as little as possible over the open surface, then wash with castile soap, immediately dressing with simple mutton tallow.

CACTUS GRANDIFLORUS.

We have recently employed this remedy in a case of spasmodic affection of the heart, with the most gratifying result. The case has been one of peculiar obstinacy, and the attacks at times characterized by great violence.

On reading Dr. Rubini's pamphlet containing the pathogenesis of the plant, I was struck by a remarkable coincidence of expression. In the provings, as given by Dr. Rubini, we have this symptom:—"Sensation of constriction in the heart, as if pressed by an *iron hand*," the very words employed by my patient when I was first called.

This symptom determined me to employ the *Cactus*, when the next paroxysm should occur. The patient was accordingly directed, when the premonitory symptoms of an attack presented themselves, to put ten drops of the 3d dilution in a half-glass of water, and take a teaspoonful every fifteen minutes, until relieved. When the occasion required, the medicine was taken as directed; but only a *single dose* was necessary—the symptoms vanished. It has been used a second time with like result. With the view of more permanent effect, I am now administering the 30th potency one dose a week.

RHUS TOXICODENDRON.

On the 4th of July, 1865, Mrs. D. was confined, about six weeks before her expected time. The delivery was accomplished without difficulty, save an adherence of the placenta at its superior border, the detachment and removal of which was effected after a short delay. The next night, the patient, by imprudently lying in a draft, with insufficient clothing, took cold, inducing high fever and intense headache, which yielded to *Aconite* and *Pulsatilla*, 30th potency. After the subsidence of the fever and headache, the patient complained of severe aching and soreness over the entire body. A few pellets of *Rhus Tox.*, 30th, were dissolved in a glass half filled with water, and a teaspoonful to be taken every two hours, until relieved. This was on the evening of the 7th. The next day, when I called, the lady directed my attention to a fine, red *rash*, which covered the entire body—remarking that it had appeared after taking the first few doses of the medicine, and that all the "aching" and "soreness" had ceased. Was the eruption due to the action of *Rhus*? I think it was.

BAPTISIA TINCTORIA.

This remedy has proven itself, in my experience, admirably effi-

cient in the form of Dysentery, of which many cases occur in the fall, in this vicinity. I have for a number of years past treated this disease, and uniformly with success, by the administration of such remedies as *Aconite*, *Nux-vomica*, and *Mercurius corrosivus*, with the latter of which the most marked results have been obtained in those cases in which the discharges consisted chiefly or entirely of blood. Last fall, however, I was called to attend a case in which the *Merc. corr.* was indicated, but which failed to afford any relief. The pain was severe, discharges consisting of blood and mucus—slight fever. Observing in Dr. Hale's "New Provings," that cases corresponding in their manifestations to the one before me, had been promptly cured by Dr. Burt, with the *Baptisia*, I determined to give it a trial. The action was very prompt, and the patient soon relieved. Another case, occurring in the same family a few days after, was relieved by the same remedy with equal promptness. At my suggestion, it has been employed by other physicians, with like results.—*Am. Homœopathist.*

BOLETUS LARICIS,

IN A CASE OF OBSTINATE INTERMITTENT FEVER.

BY WM. A. SCOTT, M. D., OF COVINGTON, KY.

July 22, 1865.—Called to Mrs. A., aged 24; found her suffering with the usual symptoms of "Intermittent," in rather an aggravated form. This patient has been harassed with this "fever," Quinine, Calomel, Opium, and old-school physicians, for about three years; chills, fever and sweat, every other day; severe thirst in all the stages; a thirst between the paroxysms; nothing would remain on the stomach; the smallest quantity of cold water would make her very sick; no appetite; extremely nervous; soreness in the lower part of the chest, which, when pressed upon ever so little, would greatly increase the pain in her head; pain in the back, and "aching of the bones;" pulse one hundred and ten; restless, and slightly delirious. Gave her *Boletus*, 1st trit. dec. scale, one grain every two hours.

July 23.—Still thirsty; doubled the dose.

July 24.—A little bad feeling, but no chill; great diminution of thirst; could drink cold water freely; appetite very good; increased the dose to about five grains.

July 26.—Called to see Mrs. A. again; she came running in, exclaiming, "I'm well, Doctor, I'm well now; feel better than ever I felt before, after getting over the *chills*."

I will just add that this is the first time I have used *Boletus*; and it produced no unpleasant symptoms in the case, but every thing about it seemed to be curative in a most righteous and happy manner. Other triturations or tinctures might have done as well, but they could not have done much better.

N. B.—Although this substance is extremely bitter, Mrs. A.'s very irritated stomach never refused it; and every atom that went down her throat, went down never to return.—*American Homœopathist*.

For the American Homœopathic Observer.

Incisions of Os Uteri in Case of Premature Labor.

BY FRANK BOND, M. D.

On the 16th of Dec. I was called to see a Mrs. C., a dark-complexioned, tall, robust woman, of about 28 years of age, who had lived in service till married to Maj. C., of about 65 years of age; who I afterwards learned had his original wife, No. 1, acting as nurse; she having resigned all marital title to his lordship, on condition of support.

The water, they said, had broken two or three hours before, but the pains were very slight. Upon enquiry, I learned that she was about five months' eniente. Upon examination, the womb presented a semi-cartilaginous feeling.

There was little or no dilatation of the os uteri. I told her I thought it would be necessary to have an operation before she could be delivered, and that I would call in another physician.

I subsequently learned, from another person, that she went to some female abortionist in New York City, who would not operate on her, she said, for fifty dollars, as there was a deformity; which was afterwards verified.

Dr. M. being called, made an examination, recommended her to sit over a decoction of bitter herbs and take internally *Pulsatilla*, in hopes of bringing on good labor, and producing sufficient dilatation of the os uteri.

This was about 11, A. M. At 4 o'clock, P. M., I was called in, and found her having quite strong labor pains, but no change in the os. It did not exceed a goose quill in size.

The Dr. was disposed to withdraw from the case; but I prevailed on him to lend a helping hand. I wound a blunt-pointed bistuary to within about three-eighths of an inch of the point, and Dr. M. made

an incision across the mouth of the womb, of about an inch, but after cutting through the womb proper, we found a second membrane, as thick as a thick hymen, thrown across the internal os. After an hour or more of hard labor, assisted by about two ounces of wine of *Secale*, we could not deliver her; and I tried to get a pair of placenta forceps, but failed. I then took a pair of curved scissors and enlarged the incision on the posterior lip of about half an inch, but the pains were not equal to the task, and the Dr. becoming tired and discouraged, proposed to relinquish the job till morning, it then being about 8 p. m. I told him that would not do, and made up my mind to finish the case. I succeeded in working my index finger through the skull to the base of the brain, and by hard work succeeded in delivering her of a five-months' male foetus and the placenta. She was bandaged, and given a solution of *Arnica* to take once in two hours. She made as quick and complete a recovery as I have often met with.

We had the benefit of the experience for our remuneration. The husband is dead and the patient well.

For American Homœopathic Observer.

AN UNUSUAL CASE OF ABORTION.

BY E. M. HALE, M. D., CHICAGO, ILLS.

A case of Abortion recently occurred in my practice, of such unusual character, and attended with so *few* symptoms of a distressing and dangerous nature, that it may be worth reporting.

The patient was a married woman, 17 years of age, pregnant with her first child. She was five months advanced in pregnancy. Her temperament was lymphatic-sanguine. Has not been very healthy until her marriage, which occurred about a year since.

I was called in the evening, about 10 o'clock. Was informed by her mother that a proper discharge of "water" had taken place about 4 p. m., since which time her pains had occurred about every half hour up to 8 o'clock, and, during the last two hours, about every fifteen minutes. Upon *examination* I found the *os* dilated to about the size of a half-dollar piece, the pains pressing the *head* forcibly against the still rigid edge. Gave five drops of *Gelseminum* $\frac{1}{16}$ th, every fifteen minutes. In half an hour found the head engaged in the *os*. A few pains sufficed to expel the head from its position, and with three or four expulsive efforts, the body of the child was born. It was living, and survived the cutting of the cord about twenty minutes. It answered perfectly the description of a five months' foetus. I expected

trouble with the placenta, but to my surprise it came away with a single expulsive effort, and in less than two minutes after the birth of the foetus.

The strangest feature of the case, however, was the fact that at no time, either before, during or after the expulsion of the foetus, did the woman lose more than a few drops of blood! There was scarce a stain on my hand, and none perceptible on the linen about her!

I am aware that premature labor after the *fourth* month is noted for the infrequency of hæmorrhage. I have attended several cases, but the loss of blood in each case amounted to several ounces.

Dr. Hodge says, "After the fourth month, no hæmorrhage ensues, from the *detachment* of the decidua; but it occurs only when the placenta is separated, partially or completely, which is comparatively a rare accident."* I have made inquiry of my colleagues, and they mention a loss of several ounces in each case of abortion, after the fourth month. The lochia in this case was colorless, and lasted nearly a week. The same pain which expelled the child from the uterus, must have separated and expelled the placenta, and at once closed up the uterine placental vessels.

Probing.

BOLETUS LARICIS EUROPÆ.

BY WM. H. BURT, M. D., OF LYONS, IOWA.

The proving was made with the 3d trituration, and the crude article.

Fever.—1. Chilliness along the spine, with frequent hot flashes of fever.

2. Fever all one afternoon and night.

3. Pulse 100, soft and full.

4. Skin hot and dry, especially the palms of the hands.

5. Awoke at midnight, two different nights, in a profuse perspiration.

6. Disposition to yawn and stretch when chilly.

7. Great restlessness after midnight.

8. Very weak and languid.

9. Great faintness at the epigastrium.

10. Great aching distress in all of the joints.

* "Obstetrics," page 471.

11. Face hot and flushed, with severe frontal headache.

12. Dull aching distress in the back and legs.

Mind.—13. Very gloomy and desponding.

14. Absence of mind.

15. Irritated at the least trifle.

Head.—16. Dull frontal headache.

17. Dull frontal headache, aggravated by motion.

18. Head feeling very light and hollow, with deep frontal headache and great faintness.

19. Deep drawing pains in the forehead.

20. Neuralgic pains in the temples.

Eyes.—21. Agglutination of the eye-lids every morning, with dull aching pains in the eye-balls.

Mouth.—22. Flat taste in the mouth.

23. Flat, bitter taste.

24. Strong coppery taste for several days.

25. White coating on the tongue.

26. Thick yellow coating on the tongue, so that the marks of the teeth are shown.

27. Loss of taste.

28. All kinds of food taste unnatural.

29. Teeth and gums very sore.

Gastric Symptoms.—30. Feeling in the fauces as if I would vomit.

31. Constant nausea, with distress in the stomach.

32. Nausea, lasting but a moment.

33. Nausea and vomiting.

34. Loss of appetite.

Stomach.—35. Distress in the stomach and umbilicus, with frequent nausea.

36. Cutting pains in the stomach all night.

37. Severe, sharp, cutting pains in the stomach every few minutes, with dull aching distress in the umbilicus, and loud rumbling of the bowels all night.

Liver.—38. Dull aching pains in the right lobe of the liver, with dull frontal headache.

39. Burning distress in the region of the gall-bladder all the afternoon, with sharp pains in the stomach, and heavy, aching distress in the whole liver, especially the right lobe.

40. Sharp cutting pains near the gall-bladder.

41. Soft papescent stool, followed by dull, heavy, aching pains the liver and umbilicus.

42. Dull, burning distress in the right-lobe of the liver and epigastrium, with dull, drawing pains in the right-lobe of the liver and whole dorsal region.

43. Heavy, dragging pains in the liver, more in the right-lobe.

44. A full inspiration produces sharp cutting pains in the right-lobe of the liver and whole dorsal region.

Abdomen.—45. Great distress in the epigastric and umbilical regions.

46. Severe, dull, aching distress just below the stomach, all day, that produced great faintness; it was terrible to endure.

47. Constant rumbling in the abdomen before stool.

48. Great distress in the bowels before stool.

49. Sharp, cutting pains in umbilical and hypogastric regions before stool.

50. Great distress and pain in the bowels after stool.

Stool.—51. Dark, lumpy, dry stools.

52. Black, lumpy, dry stools, mixed with bile and mucus.

53. Stools natural consistence, of a dark color, and mixed with bile and mucus.

54. Stools of pure mucus.

55. Stools of bile, mucus and blood.

56. Thin, yellow papescent stools.

67. Thin, very dark-colored papescent stools.

58. Yellow papescent stools, mixed with something that looks like oil, in drops the size of a cent down to small drops.

59. Stools preceded by severe pain and distress in the umbilical region, and followed by the same symptoms.

60. Sharp, cutting pains in the umbilical and hypogastric regions, before stool, and followed by the same symptoms.

61. Great disposition to strain after stool.

62. Great faintness after stool.

63. Stools of undigested food.

64. Papescent stools, without pain.

65. Stools that run from the bowels a stream of bile, mucus and black fecal matter, preceded by great burning distress in the epigastrium, right-lobe of the liver and umbilicus, and followed by the same symptoms.

66. Papescent stool, with high fever

It will be seen, from those symptoms, that the *Boletus* has a great and specific affinity for the liver.

Urine.—68. The urine is at first diminished, and then slightly increased.

69. Urine high-colored and scanty.

Back.—70. Dull, heavy pains in the dorsal and lumbar regions.

71. Severe dull pain in the lumbar region, greatly aggravated by rising up.

72. Severe dull, aching pains in the whole dorsal region, that seem to proceed from the liver.

73. Great weakness of the small of the back.

Arms.—74. Severe aching distress in the shoulders, elbows and wrists.

75. Great weakness of the arms.

76. Hands hot and dry.

Legs.—77. Severe aching distress in the hips, knees and ankles, during the chills and fever.

78. Great weakness of the legs.

Characteristic Peculiarities.—79. The right side of the body seems to be more affected than the left.

80. The effect on the liver and the stools is peculiar.

81. The absence of rheumatic symptoms in the arms and legs is especially peculiar, but this may be due to the length of time the *Boletus* was taken from the tree before it was proven.

82. Hollow, light feeling in the head.

CLINICAL REMARKS.—The great field of action of the *Boletus* is in Intermittent Fever, but in all diseases where we have been in the habit of giving *Iron* or *China*, I would most strongly recommend the use of the *Boletus*.

Twenty grs. acted as a cathartic in eight hours; forty grs. taken before breakfast acted as a most violent cathartic in two hours; fifty grs. produced bloody stools, with high fever.

To any physician who will make a proving of this remedy, and send it to me by the first day of next January, I will take great pleasure in furnishing the remedy.—*Western Homœopathic Observer*.

For the American Homœopathic Observer.

ÆSCULUS HIPPOCASTANUM.

BY C. H. LEE, M. D.

THROAT SYMPTOMS.—In the May and June No.'s of the under the heading of "Notes on the New Remedies," by

HUGHES, in *Æsculus hippocastanum*, I find that my throat symptom, caused by the drug, is to him "very problematical."

At the time I took the *Æsculus*, the weather was favorable and clear. I am not subject to sore throat. Never had sore throat before that I can remember. I am more easily put under the influence of the 3d attenuation of a drug than the mother tincture. At the time I was proving the drug, I had no throat symptoms until I took two drachms, then my throat began to get sore, and at the time my throat was sore the weather was good, and I have not had sore throat since. All this convinces me that the throat symptoms were caused by the *Æsculus hippocastanum*.

Miscellany.

OUR CHICAGO LETTER.

DEAR OBSERVER:—What with the torrid weather and the hotly contested fight between "Hahnemann College" and the "Medical University," the Homœopathic physicians of this city have had a lively time of it for the last few weeks.

The hot weather caused a large amount of illness among imprudent adolescence and children undergoing the vexatious process known as teething.

The war of the Colleges seemed likely to cause a good deal of feeling, as both Institutions had hosts of friends throughout the Great West. But happily, and we hope not too late, some benevolent "peace commission" stepped in, and a compromise was effected. We consider this the very best thing that could have been done under the circumstances. Not that the vast North-West is not extensive enough to support two Homœopathic Colleges in her central city, but this is not the best time for such an enterprise. The time for a sister college to spring up here will be when it shall be conceded by the majority that one is needed, and when the two can go on, side by side, with 'noble emulation,' instead of bickering contention.

HAHNEMANN MEDICAL COLLEGE now contains all the material which formed both Institutions. The majority of the Professors are too well known by all to need any introduction to the public. Besides these there are many others connected with the College who will be an honor to the Institution when their abilities and worth are shown.

The Faculty comprise fifteen "Chairs," or the same number of

Professors, so arranged as to best divide the labor of teacher and pupil. No other Faculty of any Homœopathic College in the United States is so systematically and comprehensively arranged

I notice by the Announcement, now being distributed, that Dr. W. M. HALE is to deliver the Course of Lectures on Materia Medica, Therapeutics and Medical Botany, the College, meantime, retaining Dr. SMITH's name and influence. This, together with Dr. SMALL's continued absence in Europe, will certainly oblige Dr. HALE to resign his position in the Cleveland College. Dr. SMALL writes from Paris that his health is improving, and he hopes to return with renewed life and vigor. Long may he be spared to work for and in the profession of which he has so long been an ornament.

We understand that Dr. D. S. SMITH expects to start on a tour of Europe early in the Spring. Such departures are contagious, and we may expect to chronicle the flight from our shores of others of our school ere long.

It is hinted that the American Institute intend to make their next meeting at Pittsburg a grand affair,—a sort of mass meeting of physicians of the *whole Union*.

By the way, I have lately learned, to my chagrin and regret, that certain jocular remarks made in my Cincinnati letter, have been made use of by certain "evil-disposed persons," who have tried to distort said remarks into personal insults. *Nothing of the kind was intended in said letter.* Dr. SMITH delivered as many lectures as his health and time would permit; and in relation to the pharmacy quarrel gotten up in that body, much animosity was shown and "peculiar" expressions were made use of by several members.

The new Quarterly, set on foot by the Western Institute, will soon appear, and I can assure you will surprise and gratify the friends of Homœopathy throughout the world, by its startling merit, and the pains taken in the selection of the articles, and the fine illustrations. Dr. SHIPMAN was just the man to whom to entrust the work. The West will now have a Quarterly which will vie with any ever issued in the East, or in Europe. Yours as ever, Nux.

HOMŒOPATHY IN SWEDEN.

Dr. P. J. LEIDBECK, a graduate of Upsala, and late Professor of Anatomy in that Institution, is now practicing in the city of Stockholm. He is regarded as one of the most successful physicians. At this time he is the only Homœopathic practitioner in the kingdom.

By law no physician can practice without a diploma from the Allopathic Medical College of Upsala, and this is not granted to adherents of the new practice.

Dr. J. G. SMITH, formerly of Missouri, who is a native of Sweden recently visited Stockholm, and now, on his return, reports to us that while in Sweden, he treated successfully over two hundred patients, and that previous to leaving there he obtained many signatures to a petition to their *Rixdag* (Congress) praying for the introduction and recognition of Homœopathy. Dr. SMITH is invited to return to Sweden, where we hope he will have success.

For the American Homœopathic Observer.

SYNOPSIS OF MEDICAL AND SURGICAL REPORTS

Of the "Northern Home for Friendless Children," Philadelphia, while under Homœopathic treatment.

BY BUSHROD W. JAMES, M. D., RECENTLY SURGEON TO THE INSTITUTION.*

Having been professionally connected with this institution from the Spring of 1857, when the system of Homœopathy was introduced, until the latter part of October, 1864, when the Board of Managers saw proper to change the practice back to Allopathic, I deem it a matter of interest to present, in the shape of a report, a few of the facts connected with the matter, together with a statistical summary of the diseases treated while under Homœopathic service, and likewise compare from the Annual Reports of the "Northern Home," the rates of mortality, during the existence of the institution, under the two systems of medicine.

The inmates are composed of neglected and friendless children, varying in age from one to twelve years, that have been gathered up, through the instrumentality of humanitarians, from all parts of our large city; taken, in many instances, from wretched hovels and from crowded tenement-houses, and from unhealthy localities where destitution, neglect, contagious diseases, and, in fact, everything calculated to injure and enfeeble their constitutions, surrounded them. Recently, in addition to these who have been abandoned by their parents, or are friendless, there has been admitted quite a number of soldiers' orphans,—the Managers having appropriated a special building to this object. These children are all included in the Report.

The sanitary regulations of the Home are good; the rooms are kept freely ventilated, and frequent ablutions, plenty of exercise,

* Read before the American Institute of Homœopathy, June, 1865.

together with a nourishing dietetic fare, are furnished the children after they enter.

The Superintendent being a man of considerable experience in the management of such institutions, maintains the rules with unwavering strictness, and thus the incursions of the prevalent diseases of the city are met, and, as far as can be, are warded off.

We have, with the exception of the few months in the latter part of our term of service, labored under the great disadvantage of having all the children, sick and healthy, in the same building, thus compelling us to exercise the most rigid care when epidemics or contagious diseases entered the institution, in order that the whole house might not become infected. During the Homœopathic term of service, it must be borne in mind, that two fearful epidemics—the diphtheria and the spotted fever, have passed over our city.

The usual visitations of scarlet fever, typhoid fever, dysentery, small-pox, &c., have likewise existed, yet the reports will show a remarkable comparason in mortality under the two systems of practice. I frequently re-vaccinated the children and nurses, thus completely excluding the varioloid—not one case having occurred.

Under the report of surgical cases will be found a large number of cases of Purulent Ophthalmia. This was a contagious form of disease usually known by the name of *Ægyptian Ophthalmia*. The nurses and children were alike affected with it.

In attacking a patient, it commenced with a congestion of the conjunctival membrane, at the inner or outer canthus of one or both eyes, which soon extended from thence along the eyelids, generally the inferior lid first. This was accompanied with a sensation of itching, fullness and slight pricking at the canthi; on examining the eye, at this incipient stage of the disease, nothing could be seen but a great redness of the inner surface of the eyelids, on their being everted. Soon, however, a few of the sclerotic arteries would be seen full and turgid, extending over the globe of the eye. This state would shortly be followed by Conjunctivitis, with a sensation as if the eye was filled with sand, and as if there was something immediately in front of the eye, which the patient desired to push aside in order to allow of clearer vision, and on attempting to read, the letters appeared like a blurred line. Twenty-four or forty-eight hours later, Photophobia sets in, and a thick, copious secretion of a whitish or yellowish mucus and pus supervenes; the eyelids become much tumefied, and there is a sensation of swelling in the globe of the eye, accompanied with an aching in the muscles of the eye. There is also, in some cases, an aching in

the temporal region and through the head. There does not seem to be much general disturbance of the system ; the digestive, respiratory and circulatory functions all remained in a normal condition.

In children of a scrofulous diathesis or a syphilitic taint, the ophthalmia assumed a most violent character, and not unfrequently these cases took on a chronic form, after the severe symptoms were removed, and then most obstinately resist further treatment. Although some very unfavorable cases presented themselves for treatment while the disease was raging in the "Home," yet it is gratifying to know that not one case of cataract, amaurosis or total blindness, occurred. Several cases of Staphyloma and Leucoma did however result, but by affecting only one eye, or, by being only partial, did not entirely exclude vision.

The disease was introduced into the "Home" through two children that had been inmates of an institution where it was prevailing. The Ophthalmia did not display itself in them until after they were admitted, and it was not until after a number of the other inmates had become affected with it that its true character was ascertained, and when the institution was thus once infected, it spread rapidly to a large majority of the children.

The healthy inmates, and also newly-admitted children, although kept isolated from the invalids in different apartments of the building and prevented from having any contact with their towels or garments, would nevertheless become affected with the disease. Persons entering the Infirmary-rooms and remaining a short time among the afflicted children, although they would not come in contact with them or with anything in the room, would be subject to an attack of the Ophthalmia.

This would seem to indicate that some contagious matter or minute pus globules had impregnated the atmosphere of the rooms, and although they were freely and constantly ventilated, and disinfectant means resorted to, yet the contaminating influence remained in force, in spite of the utmost vigilance for its removal, for a long time, and although the disease seemed upon several occasions to have been eradicated, yet fresh cases would break out, and do yet occur, even since a separate building has been appropriated to the sick.

Homœopathy was introduced into the "Home" more as an experiment than otherwise. The believers in the Allopathic system being in a majority in the Board of Managers. They however yielded to the desire of those who advocated the introduction of the Homœopathic system and consented to a trial of it, and especially so, as the Allopathic school had been unfortunate in the management of an epi-

demic of measles, in the "Home," from which several cases proved fatal. The result of the experiment can be seen in the summary below. It is a noticable fact that since the re-introduction of Allopathic treatment, more cases have died in six months' time than in any two successive years while under Homœopathic treatment.

Statistical Report of Medical Cases treated in the "Northern Home for Friendless Children," Philadelphia, for seven and one-half years, from the Spring of 1857 to Oct. 24th, 1864. Under Homœopathic service. By BUSHROD W. JAMES, M. D., while Surgeon to the Institution.

DISEASE.	No. treated.	No. cured.	No. relieved	Died	DISEASES.	No. treated.	No. cured.	No. relieved	Died
Abscess	16	16			Hip joint disease	1	0	1	
" of Parotid Gland	2	2			Hordeolum	1	1		
Amenorrhœa	2	2			Hydrocephalus, chronic	4	1	3	
Anasarca	5	3		2	Hydrops Articuli	1	1		
Angina facium and Tonsillaris	38	38			Icthyosis	1	1		
Apthæ	9	9			Ileus	1	0		1
Ascites	1	1			Impetigo	3	3		
Bronchitis	7	7			Inflammation of Lungs	6	6		
Catarrhal Fever	26	26			" Meibomian glands	2	2		
Cephalalgia chronic	3	3			Indigestion	8	8		
Carbuncle	1	1			Invermination	2	2		
Chorea	1	0	1		Jaundice	8	8		
Congestion of the Liver	1	1			Laryngitis	2	2		
" " Lungs	3	3			Leucorrhœa	1	1		
Conjunctivitis	4	4			Marasmus	18	16		2
Convulsions	5	5			Miliaria	1	1		
Cornitis	1	1			Neuralgia	3	3		
Cough chronic	1	1			Ophthalmia catarrhal	15	15		
Croup catarrhal	16	16			Orchitis Tranmatic	1	1		
Croup with measles	6	6			Otorrhœa Scrofulous	19	10	9	
Croup membranous	2	2			" Sequela of Measles	5	3	2	
Cyanosis	2	2			" " Scarletina	3	3		
Diarrhœa	34	34			Parotitis	33	33		
Diphtheria	22	22			Peritonitis acute	2	2		
Disease of the Heart	1	0		1	Pericarditis	1	1		
Dropsy, sequela of Scarletina					Periostitis	1	0	1	
and Measles	3	3			Pertussis	17	17		
Dysentery	23	22		1	Phthisis Pulmonalis	1	0		1
Dysmenorrhœa	1	1			Pleurisy	4	4		
Eczema	4	4			Pneumonia Typhoid	13	13		
Enuresis nocturnal	13	10	3		Prolapsus Ani	3	2	1	
Epilepsy	1	1			Psoriasis	19	19		
Emphysema	1	1			Puruopthalmia	4	4		
Erysipelas	10	10			Purpura Hæmorrhogica	1	1		
Eruptions	99	99			Quinsy	1	1		
Fever catarrhal, following					Repelled eruptions	2	2		
Measles	10	10			Rheumatism	14	14		
Fever, Intermittent	4	4			Rubeola	60	60		
" Irritative	3	3			Rupia	3	3		
" Nervous	1	1			Scabis	8	8		
" Remittent	1	1			Scarlatina	9	9		
" Typhoid	31	28		3	Scarlatina Maligna	24	21		3
" Spotted (Typhus Pete-					Serofula	12	6	6	
chialis)	16	15		1	Softening of the brain	1	0		1
" Typhus Cerebralis	1	1			Tinea Capitis	66	66		
Gastritis	16	16			Tonsillitis	1	1		
Gastrodynia	14	14			Ulcerations chronic	11	11		
Goitre	1	1			" malignant	10	10		
Gonorrhœa	3	3			Urticaria	1	1		
Hæmatemesis	1	1			Varicella	6	6		
Hæmorrhoids	1	1			Zona	1	1		
Herpes	20	20							
Helminthiasis	6	6							
					Total	928	885	27	16

Surgical Cases treated in the "Northern Home for Friendless Children," Philadelphia, Pa., during seven and one-half years of Homœopathic service, ending Oct. 24, 1864.
BUSHROD W. JAMES, M. D., Surgeon.

Name.	Treated.	Cured.	Relieved.
Abscess, lancing.....	8	8	
Anthrax	1	1	
Conical Cornea.....	2	1	1
Ectropion	4	3	1
Extraction of Tumors.....	2	2	
Fracture of Arm.....	2	2	
" Nose.....	2	2	
" Ribs.....	1	1	
" Clavicle.....	1	1	
Hernia,.....	1	1	
Luxation of the Forearm.....	3	3	
Ophthalmia Purulent, or (Ægyptian)	561	541	20
Periostitis.....	2	2	
Poisoning with Rhus Tox.....	1	1	
" Stramonium.....	1	1	
Syphilis.....	9	9	
Wounds	7	7	
<hr/>			
Total.	Treated, 608	Cured, 586	Relieved, 22

Died, 0

Comparison of Homœopathic with Allopathic Medical Service. From the Annual Reports of the Board of Managers of the "Northern Home for Friendless Children," Philadelphia, Pa.

No of children admitted from the opening of the Home, Aug. 3, 1853 to May 1, 1854,.....	47	Died, 0
Admitted from May 1, 1854 to May 1, 1855.....	70	" 0
" " " 1855 " 1856.....	114	" 2
" " " 1856 " 1857.....	125	" 5
No. in "Home," Nov, 1, 1864, when changed back to Allopathic service.....	184	
Admitted from Oct. 24, 1864 to May 1, 1865,	254	" 9

Total inmates while under Allopathic service, 794 Deaths, 16

No. of inmates when the Homœopathic service commenced, in the Spring of 1857.....	80	Died, 0
No a mitted from May 1, 1857 to May 1, 1858,	155	" 0
" " " 1858 " 1859,	192	" 1
" " " 1859 " 1860,	190	" 4
" " " 1860 " 1861,	178	" 2
" " " 1861 " 1862,	239	" 4
" " " 1862 " 1863,	225	" 0
" " " 1863 " 1864,	204	" 2
" " " 1864 to Oct. 24, 1864,	136	" 3

Total No. inmates while under Hom. service, 1599 Deaths, 16

SUMMARY.

Homœopathic service, seven and one-half years.

Allopathic service, four and one-quarter years.

Total No. inmates under Homœopathic service, 1599 Total deaths, 16

“ “ “ Allopathic “ 794 “ 16

Majority of inmates under Homœopathic service, 805

Difference in mortality, 0

For the American Homœopathic Observer.

THE DILUTION QUESTION.

BY H. C. ALLEN, M.D., OF BRANTFORD, C. W.

“ When we have to do with an art whose end is the saving of human life, any neglect to make ourselves thoroughly masters of it, becomes a crime.”—HAHNEMANN.

Of all “ questions ” which have formed the groundwork of controversies in Homœopathic literature, for the last few years, and which in the opinion of a majority of our best practitioners, is at present and will continue to remain an unsettled affair, there are none which in magnitude and diversity of opinion and practice, can approach the “ Dilution Question.” To outsiders it is apparently the only rock on which there is a possibility of a division in our ranks, as in the profession we are known as *high* or *low* dilutionists, and rated in the estimation of our fellow-laborers accordingly. While all are ready to admit its great practical importance, no one has yet appeared in the “ arena ” with a proposition that is equal to the task of uniting the discordant elements, and thereby accomplishing what has so long been desired, viz :—a permanent settlement.

While some members of our school (whose character for probity and truthfulness cannot for a moment be questioned) meet and conquer the most fatal of our acute diseases successfully with high dilutions alone; others with equal confidence and apparently equal success, treat every case, whether acute or chronic, with the prime tinctures and first triturations. No wonder the youthful graduate looks on the controversy with doubt, not knowing which side of this question to adopt when he enters upon the active practical duties of his profession. But this, like all other questions of minor importance in the application of Nature’s “ law of cure,” is destined, in practical experience at the bed-side, *to work out its own solution*.

When Hahnemann first propounded and published to the medical world his “ law of similia,” *facts* alone were the basis upon which the superstructure was built; *facts* the clinching arguments which he offered to the opponents of his new therapeutics, in both public and

private disputes; *facts* alone the guiding star which nerved him for the encounter of every species of opposition which beset his pathway in those his days of trial. So in the solution of the question of dose; our *rule of action* in a controversy so complicated must eventually be one deduced by the stern logic of facts, and by that alone. There are a few of these that may be regarded as settled beyond dispute—acknowledged facts by every member of our School. It is a fact as well demonstrated as any in Mechanics or Natural Philosophy, that “medicines tend to cure diseases similar to those they tend to produce.” It is a fact established by the evidence of “witnesses by the thousand,” that certain diseases are cured by the lower dilutions, or even the prime tinctures in appreciable doses. It is a fact, established by evidence equally reliable and incontrovertible, that certain other ailments are speedily, safely, and more easily brought to a favorable termination with high dilutions alone. It is a further fact, and one upon which I place great reliance, that those members who have joined our School from the Allopathic ranks, who have constantly been in the habit of administering massive doses of *drugs*, are at first timid and wavering in the use even of the mother tinctures; but, as they see the beautiful effects of our dilutions and triturations, in daily use at the bed-side, they gradually cease to use the crude materials, and eventually become, in some cases, our firmest advocates of high dilutions. The opinion of such members as have, in a spirit of investigation, given every dilution a trial, with the ostensible object in view of arriving at the truth, should and would have great weight in a court of justice.

Men just emerging from the slough of Allopathic empiricism, and “capable of sacrificing their pre-conceived opinions and a portion of the respect they had previously enjoyed in the profession and community, must generally be men possessed of sound minds and actuated by pure and lofty motives; men who prefer facts to hypothesis, and the interests of truth and humanity to their own temporary advancement.” For my own part I can neither treat successfully nor satisfactorily all the cases that come under my care with either *low* or *high* dilutions exclusively. Certain classes of diseases, *as a rule*, always require high dilutions; as acute diseases of children, particularly those affecting the serous membranes,—Meningitis, Peri-pneumonia, &c.

A few years ago I thought that a severe case of acute Meningitis in a child could alone be successfully treated by *Acon.*³ and *Bell.*³, in alternation every half hour, or hour, according to the urgency of

the case. But I now find that I was mistaken. At present I seldom use any other remedy than *Bell.*, and that in the thirtieth dilution. Now if I change the dilution, it is to the higher. Then, if any change was deemed necessary, it was down to the first or mother tincture. I can now cure my little patients in a very much shorter time than I ever could with the alternating system and lower dilutions, and with very much greater satisfaction to myself. The action of the high dilutions is equally prompt and far more permanent in effect than the lower, seldom requiring half a dozen remedies to complete the cure after the acute symptoms have subsided. My clinical experience is of corresponding value; and to my brother practitioners who as yet have not given the single remedy and high dilution an honest and straight-forward trial, I would say, do not allow prejudice and preconceived opinions to deter you from investigating a subject fraught with weighty evidence and lasting and permanent benefit to yourself and the profession. If you reject them, simply from non-belief in their efficacy, without having given them an impartial trial at the bed-side; condemning before you have even tried them; giving as your only reason, "a want of faith" in their curative power—in sincerity I would ask you and in candor have you answer, *How far are you in advance of your Allopathic brother?* He uses the law of "similia" in part, and cures the majority of his patients homœopathically without being aware of the fact, as when he administers *Mercury* in Syphilis, *Quinine* in Febres-intermittens, *Acon.* in Neuralgia, etc., etc., or without even mentioning the name of Hahnemann, except in ridicule or jest. He, too, prescribes his remedies in appreciable doses; doses capable of being *seen, weighed* and *felt*, to the sorrow of many a toothless-patron, compelled "to gum his way through life." He never attacks "the law of cure," but expends his argument in ridiculing the name of Homœopathy on the question of dose alone, without ever testing their efficacy. You are opposed to high dilutions on precisely similar grounds. His argument is that an infinitesimal dose must have an infinitesimal effect. You do not think the high dilutions worthy your notice, and you cannot give a very definite reason for your belief. In fact, the distance between the massive doses of our modern Allopathists and your prime tinctures and first dilutions is not vastly greater than between prime tinctures and high dilutions—the one unconsciously practicing Homœopathy, the other knowingly so. While I firmly believe that certain diseases, as a rule, require high dilutions, I am equally well convinced that others can only be cured by low dilutions, or even prime tinctures, in appreciable doses, as our typhoid

and intermittent fevers of this Western country. To *both* of these rules there are of course many exceptions. But I am convinced from observation that many, very many of our School, in the treatment of both acute and chronic affections, change *remedies* when they should only change *dilutions*. If a medicine does not effect a rapid and perceptible improvement in a given time, they immediately jump at the conclusion that they have not made a proper selection, and prescribe at once some other remedy (without again carefully and thoroughly investigating the case, to ascertain the cause of the present failure) which in its turn is also set aside for some more fortunate but equally short-lived successor.

A very interesting case illustrating this point recently occurred in my own practice. During my absence in the country, one of my students was called to see a case of what he diagnosed intermittent fever. The patient was a young girl, aged 13, of sanguine temperament, light hair and eyes. Had been suffering about a week with chill, fever and sweat, occurring every afternoon, and lasting till midnight. Seeing her in the afternoon, when the fever was over, he gave her *Gels.* 1st, five or six drops, in water; a teaspoonful to be taken every hour while fever continued, and six drops *China* every two hours, until fever returned the next day, when it was to be discontinued and the *Gels.* resumed as before. She was kept on this prescription four days, when no sign of improvement taking place, the *China* was increased to ten drops and the *Gels.* given in tincture every hour while chill and fever were on. This was continued three days longer without the slightest improvement. The *China* was now discontinued and *Gels.* tincture given, three drops every three hours, without reference to chill or fever, and to his astonishment it completely checked the fever for two consecutive days, but it returned on the third, when it no longer had any control over the disease. He now gave *Quinine*, 1st dec. trituration, six grains every three hours during the apyrexia, and *Acon.* during chill and fever, for several days, with the former results; in fact, the last paroxysm seemed more severe than any preceding one. The feet were becoming œdematous, the pulse over 100, tongue thickly coated with a brownish fur; intense thirst; and she complained of great fullness and uneasiness after eating or drinking; inability to lie down, and difficult respiration; when, on examination, I found the abdomen distended and apparently dropsical. He wished to have one more trial, as he knew the *Boletus*, from its proving, must cure his patient. I consented, and he administered the first trit. every two hours, for three days, when the patient complained of feeling *no better*.

He wished me to carefully examine the case and tell him what would relieve her. I could see nothing but *Ars.* indicated, on account of the paroxysms, returning every afternoon, accompanied with thirst, and swollen feet and distended abdomen, etc. *Ars.* was accordingly given, in the third, second, and lastly the first dec. trituration, each for several consecutive days, without the least improvement. The case now began to assume a serious aspect, and I had every reason to fear a fatal termination. I began to search about for some cause sufficient to explain the mystery; an error in diagnosis, medical aggravation, idiosyncrasy, location, previous health, etc.; but nothing was discovered. As I could see nothing but *Ars.* indicated, I gave her, at 9, A. M., three globules of *Ars.*²⁰⁰, and *Sach. Lac.* every three hours, while awake, or until I saw her. Next day I saw her, about the same time. She had had no chills or fever; slept well all night, feeling much better in every respect. Gave her *Ars.*²⁰⁰, as before, which was repeated for three days, since which time the fever has not returned, and she says she feels as well as ever. I am convinced that this case would have as readily yielded to the same remedy six weeks before as then, but "a want of faith" prevented its trial.

I have frequently heard physicians complain that in treating diseases of children, some remedies, particularly *Bryonia*, *Calc. carb.*, and *Chamomilla*, had almost invariably left them in the lurch whenever they had occasion to resort to them; that they had never derived the benefit from them they expected to from studying their pathogenesis, as laid down by our writers on materia medica, and their particular indications, as given in our works on practice. And I would ask *Why?* Has not the dilution question the power to solve the problem? I have frequently seen a few drops of *Cham.*² put in a half ounce vial, filled up with alcohol, labelled and used as *Cham.*³. If *Cham.* be properly diluted and used in the dilution most appropriate to the infantile organization, (the sixth, twelfth, or eighteenth,) it will be found equally as effective as any remedy in the materia medica in its peculiar sphere. *Bryonia* in the lower dilutions, *i. e.* the first, second and third, is of very little efficiency in the treatment of the bronchial and pulmonary diseases peculiar to infancy. If we would derive all the benefit which *Bry.* is capable of yielding in those affections, we must administer it in the proper potency. The charge may be too true, but the remedy is not guilty. The fault lies at the door of the physician. Cause and effect follow each other with infallible certainty. I am satisfied that our remedies are capable of controlling all curable maladies; but I am not quite sure that we are competent

in every instance to administer them correctly. "And thereby hangs a tale."

[To be continued.]

HOMŒOPATHY IN LIVERPOOL.—We are permitted to publish the following extract from a letter received by Dr. E. M. Hale, of this city, from Dr. A. E. Small, who is now in England :

"There are eight physicians in Liverpool who practice Homœopathy. Four of these are members of the Royal College of Physicians, viz : Drs. Drysdale, Hayward, Simmons and Wright. The remaining four are members of the Royal College of Surgeons, viz : Messrs. Moore, Williams, Hudson and Tucker. There are, also, two in Birkenhead, on the opposite side of the Mersey. There are three pharmacies, two in Liverpool and one in Birkenhead, all under the supervision of Messrs. Thompson & Copper, whose principal stand is at 43 Bold street. There is one dispensary for the benefit of the poor, No. 3 Hordman street. It is a large edifice of brick and stone, and makes a fine appearance from the street. This building is owned by the Dispensary Corporation. The ways and means of supporting the institution are from voluntary contributions. Thus far the building has been paid for, and a considerable sum in addition has been collected toward the establishing of a dispensary fund. The number patients treated the last two years is 33,461, and 735 poor families have been visited in their homes. The total number of visits made to them is 3,862. From statements made to me by Mr. Thompson, one of the proprietors of the Pharmacies, I should infer that homœopathic patronage was greatly on the increase, and that physicians are in demand. The prejudice against turning attention to homœopaathy fully accounts for the small number of old school physicians who embrace the doctrine, and yet in spite of all the efforts to stifle investigation, the people, seemingly, are ready to discard Allopathy and come under the supervision of Homœopathy, just as fast as well educated physicians can be supplied them."—*Chicago Tribune*.

Call for a Homœopathic Physician.

HARVEY, Albert Co., N. B., Sept. 8, 1865.

DEAR SIR :—We have just had a six months' visit from Dr. L. G. STANFORD, a Homœopathic physician of Patten, Maine, who was sent for to attend a bad case of Vertigo, as the patient continued to sink under Allopathic remedies. His success in that case induced the

people to persuade him to prolong his stay for six months. During that time he has had a very extensive practice, and with such good success as to make a large number of friends to Homœopathy, who could not now be persuaded to accept the old mode of treatment. He says he would willingly make this country his home, as he knows of no better field for a Homœopathic physician, but he had previously settled himself in Patten, and his business there required his attention. If he can dispose of his effects there without loss, he wishes to return ; but as that is doubtful, he has advised us to apply to you, to procure for us another Homœopathic physician. The County of Albert contains between nine and ten thousand inhabitants, nearly all of whom are in good circumstances, and favorable to Homœopathy. There is plenty of room for two good practitioners in the four parishes into which our County is divided. We have a number of Allopathic physicians, but Homœopathy has been, until recently, almost unknown here. Could you recommend to us a thorough Homœopathic physician, of strictly temperate habits and good morals ; a graduate of some medical college you are acquainted with, and who could come here as early this Autumn as possible?

Should it be required, we will send a letter, signed by some of our most influential men ; or if you wish to be informed, from Dr. STANFORD, concerning the field of practice, you will please address him, at Patten, Me.

I shall be anxious to hear from you at as early a date as possible.

From yours truly, JAMES BREWSTER.

CLIFTON SPRINGS WATER-CURE.

BY REV. PHARCELLUS CHURCH, D. D.

The Clifton Springs Water-Cure merits some endeavor to set before the public its excellent curative arrangements and its truly religious and philanthropic character. It began with Dr. Henry Foster, in 1850, without capital, though now with an investment in buildings and grounds of probably \$100,000, which is an outgrowth of the institution itself. The incipient wooden buildings, which followed one after another as the growth of the establishment required, have now given place to a partially-finished brick structure, 235 feet long, with spacious piazza in front the whole length, including a central building five stories high, and two wings, each four stories, one 100 feet deep and the other 200 or 300, with gymnasium and other appendages. It will accommodate 200 or 300 guests, and if the experience of the

future is like the past, will always have more applicants than can be admitted.

It proceeds on the principle that, to secure a healthy condition of the body, a right state of the moral and spiritual nature must first be established, with a view to a sanitary use of the appetites and activities. When so much of the building as includes the chapel had been completed, at services in which Dr. Hickok, of Union College, took part, he said, "it was intended to consecrate it to the worship of the Almighty, and to dedicate the entire building to the useful and charitable purpose for which it was designed." "The idea originated in Dr. Foster's devotion to his Maker and intense love for his race—a devotion and love so plainly manifested in his never-ceasing labor for the cure of the soul as well as the body." "The plan is," said the presiding officer on the occasion, "to make the institution substantially eleemosynary—to be conducted for the benefit of the poor of all evangelical denominations, but more especially for that of poor clergymen and their families. A sufficient number of patients will be received, able to pay the charges of their board and treatment, to meet the expense of those who are deserving the charity of the institution. Doctor Foster's intention is thus to devote the entire income arising from the receipts of the paying patients to the noble cause of charity, and especially of charity to the *Lord's poor*. It will be observed that, in accordance with his design, no part of the income is to be retained for his own personal use."

Dr. F. informs me that it is his purpose to obtain an endowment of \$100,000 to support the medical attendants, that the proceeds may be for the benefit of the poor, and especially of ministers worn out in the service of their Master. Though the property is at present in his hands, he holds it in trust for the public, and I am told that he receives from its proceeds a limited salary, like its other employees.

The institution has grown up under influences like those of the Muller Orphan Asylum in England. It has daily prayers, two week-day evening services, two sermons on the Sabbath, and the frequent observance of the Lord's Supper. Many conversions are said to occur by its means, and it compares well with our most spiritual churches for depth, activity and zeal in its piety and labors. It is not exclusively hydropathic in its treatment, but eclectic, using homœopathy and allopathy in cases which seem to require them. Nor is it exclusively vegetarian in its diet, but spreads a liberally variegated table to meet every reasonable requirement of the appetite. On the whole, we think the Christian public ought to know that we have such an institution, that they may take it into account in seeking health and recreation.—*Independent*.

DEFERRED.—Notices of new Journals, Books, &c., and several interesting communications.

Practice of Medicine.

VERATRUM VIRIDE in the TREATMENT of ERYSIPELAS.

BY J. DRUMMOND, ESQ., L. R. C. P. E., &c.

CASE I.—Mrs. D., æt. 24, became suddenly ill on April 18th, 1865. Whilst dressing in the morning, she noticed a flush of redness with some swelling on the side of the nose, and felt weary, with aching limbs and headache. She dressed, however, and presided at the breakfast table. Two hours afterwards she had a severe rigor, lasting half an hour, and she was so ill that she was obliged to return to bed. I saw her at mid-day, the face was then much swollen, tight, throbbing and bursting headache, pulse very quick, distressing nausea, tongue coated and dry. I ordered the face to be sprinkled with flour, and gave *Acon.* a and *Bell.* a alternately every half hour. The erysipelas spread rapidly, and at night the eyes were completely closed, and the features obliterated.

April 19th.—No improvement, scalp painful and puffy for about an inch above the forehead. Vomited twice during the night, pulse very rapid and feeble—complains of great prostration and feebleness; at my request Mr. Cox kindly saw the case with me, and at his suggestion the face was completely covered with a mask of lint, moistened with a lotion of thirty drops of *Veratrum Viride* in half a pint of tepid water. *Rhus* and *Bell.* were administered every half hour, and Burgundy, port wine and beef tea, were given in small but in frequently repeated quantities.

April 20th.—No decided change. The patient expresses a desire to have the lotion constantly applied, and says it relieves the pain and burning. The erysipelas is extending over scalp; no delirium, but complains of slightest noise, and is very wakeful and anxious.

April 21st.—The face decidedly better, and the scalp on the vertex less tender and puffy. The left ear and left side of head very painful and swollen. The lotion to be applied very freely. From this date

the symptoms began to abate. The erysipelas wandered from place to place, now on the face, then on the scalp, but by the use of the lotion it was speedily dispersed, and although for a week it appeared no sooner to be allayed in one place than it sprang up in another, yet it gradually became less severe, and the constitutional symptoms improved. The patient was quite aware of the valuable services rendered by the lotion, and begged constantly for its renewal, as it relieved the local suffering. My own conviction in this case was, that we held the disease completely in check by the *Veratrum Viride*, and that a few hours sufficed to disperse the redness and swelling, whilst the pain was mitigated from the first application of the lotion.

CASE II.—Mr. N., æt. 62, employed in a glass works, called upon me on the 12th June, 1865. He had been spending a few days in the country and had been exposed to excessive sun heat. His face was greatly swollen, and the eyelids so much puffed that he could only find his way with difficulty, and he complained of the burning and stinging pain of the face. He had applied during the two previous days cream and buttermilk, and had taken some aperient medicine, but without the slightest relief. As there was little constitutional disturbance I simply ordered him to use the *Veratrum Viride* as a lotion to the face, by means of lint moistened with it. This gave relief, and I heard no more about him except indirectly through his son.

CASE III.—Miss T. D., æt. 19, after an exposure to damp during the catamenial period, was attacked with erysipelas. I did not see her at the onset of the disease, but she had been advised to take *Bell.* and *Rhus.* alternately, and to apply a saturnine lotion to the face. She disliked this lotion, and at last refused to use it, and gin and water was substituted by her friends. The next day I visited her, the nose, eyes and forehead were much swollen, and the scalp was very sensitive to pressure to the vertex, although it did not appear puffed. The only change I suggested in the treatment, was the substitution of the *Veratrum Viride* for the other lotions. Amendment at once set in, and she was convalescent within the week, and she spoke most favorably of the effects of the *Veratrum*.

CASE IV.—Mrs. G., æt. 46, a stout, plethoric lady, with a strongly marked gouty diathesis, was taken ill on the 21st May, 1865. She had been sitting on the lawn watching some friends play at croquet until late in the evening; after returning to the house she had a severe rigor, followed by pungent fever, and distressing, throbbing headache. I saw her next day, pulse 100, tongue coated and dry, thirst, head-

ache, severe pain in the right leg, and complete inability to move it. Upon examining the leg, found it intensely red from the ankle to above the knee, swollen, and œdematous, the skin looking as though it must burst. Low diet, *Acon.* Δ and *Bell.* Δ , alternately, and dressed the leg with strips of lint moistened with *Veratrum* lotion, which were covered with oil silk. In the evening the fever less severe, the headache still most intense, ordered *Rhus.* and *Bell.*, and the lotion to be continued.

May 23d.—The headache most distressing, leg looks paler, but the erysipelatous blush has extended up the back of the thigh. Lotion to be applied to these parts, to take *Merc. Vivus* Δ gr. ij. immediately and then continue the *Bell.* and *Rhus.* Evening, the headache is so intense she declares she must go mad if she does not get relief, and is annoyed at my expressing a wish to examine the leg, which she says is comfortable; the erysipelas less; ordered *Glonoine*¹ and *Apis Mel.* \mathcal{B} , and the lotion to be continued.

May 24th.—After the first dose of *Glonoine*, fell asleep and slept tranquilly for two hours. Head much relieved, leg better. From this date she gradually improved, and it is not necessary to detail the daily symptoms. Several weeks elapsed before she regained sufficient strength to move about, the leg remaining so much swollen that she could not put a stocking on. She, however, gradually improved from day to day, and went to Wiesbaden, in July, for the benefit of her gouty symptoms, from which place I have received most favorable accounts of her progress.

REMARKS.—*Veratrum Viride* has been a favorite medicine of Dr. Garth Wilkinson, and to his suggestion we must refer, as the original proposer of this lotion in cases of erysipelas. From what I have seen I believe I may safely say that it is one of the most serviceable remedies in our materia medica.—(*British*) *Homœopathic Observer*.

BROMIDE OF AMMONIUM IN EPILEPSY.

During the last two years I have called attention to the *Bromide of Ammonium* several times, as being the remedy most genenerally applicable in the treatment of epilepsy. Further experience in its use, and reports from various parts of the country, confirm what I have stated, and have also developed new uses of it. It acts specifically on the brain and spinal cord, arresting irritation upon which determination of blood depends, and consequently spasmodic action, and so controlling the nutritive processes, that after a time, the tendency to such irritation is lost and a permanent cure effected.

According to this theory, it is the opposite of *Belladonna* and *Ergot*, which act as direct and somewhat permanent stimulants, causing contraction of blood-vessels and consequent freedom of circulation when impaired by dilation of these as described by Brown Sequard. It would therefore be indicated in those cases in which there was evidence of determination of blood, manifested by a hard pulse, redness of surface, rosy hue of nails and lips, flushed face, contracted pupils, etc., in contradistinction to those cases in which the pulse is soft and oppressed, the veins marked, coldness of extremities, light, purplish pallor on excitement, dilation of pupils, etc. If this be correct, and I think it is in the main, we have a pretty definite guide to the use of these remedies, not only in epilepsy, but also in other diseases.

My experience in the treatment of epilepsy has been pretty extensive, and therefore have had the opportunity to thoroughly test the value of remedies. In ten per cent. of the cases no advantage results from treatment, in thirty per cent. the relief is temporary, and in the remainder a cure may be effected. Of this sixty, forty-five will yield to the use of Bromide of Ammonium alone, or in combination with other treatment.

In the treatment of chronic disease we not unfrequently find that spinal irritation is a very important element of the disease, and to effect a cure this must be removed. Here the *Bromide of Ammonium* can be used with advantage, especially if the disease is paroxysmal, as regards pain or functional derangement. It also seems to exert a marked influence over the urinary secretion when this is scanty, its passage attended with unpleasant sensations, and loaded with uric acid. In such case I give it in some mild diaphoretic infusion, or largely diluted with water.

It has been employed in epidemic spinal meningitis, with reported success, modifying the irritation, and giving a better circulation of blood; in these cases it is given in full doses.

In the treatment of diabetes mellitus it will, I think, be found a valuable agent, and associated with remedies that gently stimulate the liver, and improve digestion, offers the best treatment I have ever employed.

In some cases of hooping-cough it exerts a specific action, as it does in a few cases of asthma, and other spasmodic coughs, but we have no guide to determine the cases in which it will prove available; hence its use is entirely empirical.—*Dr. J. M. Scudder in Eclectic Medical Journal.*

For the American Homœopathic Observer.

CIMICIFUGA IN THREATENED ABORTION.

BY R. SHIDE, M. D.

CASE I. Mrs. G. H., mother of four children, had during pregnancy to run through the whole catalogue of ailments. The midwife was called three or four times, and had to stay often two days; and with headache, vomiting, fainting fits, etc., the last four months of her time were filled up. This spring she came under my treatment. I gave her a drachm vial of *Cimicifuga* ², and told her whenever the bearing down pains were felt, to pour about ten drops into a tumbler half full of water, and take a teaspoonful every five or ten minutes. With an occasional dose of *Ipecac.*, this was all the treatment she received. Her health was very good. She was on her feet up to the last minute, and was delivered of a fine baby; the labor lasting about twenty minutes. Her getting up was very good.

CASE II.—Mrs. W., mother of eight children. Prolapsus uteri for about five years. Was taken about the fourth month of her pregnancy with false labor pains. Abortion was very likely to take place. I gave her *Cimicifuga*, with the same directions as above. One morning, sitting at the breakfast table she had such a violent attack that she thought she should certainly miscarry. She had just time and strength to reach the bed, about four steps off, and fell down. Her daughter brought her the vial, she poured with trembling hands about a half drachm of the tincture in a cup of water and drank it out at once. To use her own expression, she felt the pains ebbing away. In an hour she was entirely well, got up and walked about a mile to a neighbor's house, where I found her. About four weeks after she had only one more and that a slight attack, which yielded to a few doses of the remedy, run her full time without accident, and was delivered of a healthy boy.

For American Homœopathic Observer.

INTERMITTENT FEVER.

BY R. SHIDE, M. D.

The summer of 1865 was, in my locality, Franklin Co., Missouri, unusually wet. It rained for three weeks daily. Houses of all descriptions were soaked. My library is so covered with mold that the titles of many books are hardly visible. Beds and bedding are damp, and sunning and airing, when there is an opportunity, helps for

about a day. Wheat, barley and oats sprouted out; peaches and apples rot in a very short time, and have not their usual flavor. Fungi of all forms and of the liveliest colors, cover the ground in untold numbers. Up to the middle of September the weather was unusually warm, favoring the dampness of the atmosphere. The consequence is that almost every one is down with ague.

My treatment in most all simple cases is *Gelsemium* tincture, ten drops in a half tumbler of water, a teaspoonful every half hour during the chill and fever, or the whole fever day. During the intermission, *Arsenicum*⁴, four pellets every hour. In most all cases where no clandestine purging was resorted to, I succeeded in suppressing the ague on the ninth day; frequently on the third day; but some cases run on and other treatment had to be adopted.

I will remark that we live in a very healthy region, high and dry. If I was practicing in the Wisconsin bottom, where the fevers are more violent and fatal, I might adopt other and stronger medication.

The fever here ends often with cramp-like pains in the bladder. One patient stated that he jumped up fifty times a day to urinate, and succeeded only a few times in pressing out a few drops. In one case I heard of it proved fatal. Where this disorder is slight, no treatment is called for; but in others, treatment must be resorted to. I have used *Bryonia* to cover the gastric symptoms, and *Rhus* for the headache.

For the American Homœopathic Observer.

NEW REMEDIES.*

BY A. R. BALL, M. D., MARSHALL, MICH.

The responsibility of recommending *new remedies* to the profession for the alleviation and cure of diseases, belongs, in my opinion, to abler if not older votaries of Hahnemann. While engaged in cogitating upon this subject of *new remedies*, I was reminded of the words of the Preacher: "*Is there anything whereof it may be said, See, this is new? It hath been already of old time which was before us.*" It is well known to all of you, especially to those who have been educated in the Allopathic school, that their materia medica is made up almost entirely from the "say so's" of old women and quacks, as they call every one who is not what they call *regular*.

There has been much discussion in our own school on the subject of the use of remedies before they have been *proved* upon the healthy. Some have strenuously opposed the administration of any drug for the

* A Report to Michigan Homœopathic Institute, June, 1865.

cure of symptoms of disease, unless *proved*, while others have ventured to administer any remedy known to have cured certain symptoms of disease by repeated trial, and as I belong to the latter class, I do not deny but the saying is true that "fools rush in where wise men dare not tread." Whenever, by the administration of a remedy, symptoms of disease are cured, I take it for granted that the cure was performed by the Homœopathic law of cure. As "there is nothing new under the sun," I would call the attention of the profession to an *old remedy* used by the people in some parts of this State as a domestic remedy for the ague. I refer to the

CHELONE GLABRA—(*Snake Head*.)

I have used it in decoction and tincture, in large and small doses, with great satisfaction to myself, as well as to my patients. In the so-called Quinine Cachexia, in doses from five to ten drops of the tincture, three times a day, it has proved to be *almost* a specific in my hands, never having failed but once in over twenty-five cases. I have no hesitation in recommending this remedy to the profession, in hopes that in abler hands it may become more useful.

ROBINIA PSEUDO-ACACIA.

On the first day of April last, at 9 o'clock P. M., I was called to the house of a gentleman in this city, to see two of his children, who the messenger said were poisoned by chewing the bark from some locust trees which had been cut down in front of a residence adjoining the premises of Mr. H.

The children were aged four and nine, respectively. The eldest was a girl, the youngest a boy. On my arrival, the mother, a very intelligent lady, gave me the following account (the father of the children being absent at the time of my arrival). The children were on the street, at play, just before supper time, which was about 6 o'clock. They were called to supper, ate their supper as usual, and in about an hour afterwards they began to vomit. On her inquiring of the girl what she had been eating, she said they had been chewing the bark from the locust trees which the man cut down by the walk. Purging soon succeeded and continued every few minutes, as also the vomiting, for about an hour, when the purging was changed to a more frequent inclination to evacuate the bowels, but with but little success. I arrived at nine o'clock, as before stated; the little boy was apparently asleep; the little girl was on the vessel trying to evacuate the bowels, with apparent tenesmus and great pain; a very little dark liquid was in the chamber, on the mother's removing her to the bed.

The boy awoke in about five minutes and vomited a little watery, sour smelling substance, with much retching. Called for water, and seemed very much prostrated. Pulse 55; hands and feet cold; no perspiration; pupils contracted. Gave tincture *Camphora*, in water, five drops every ten minutes. After the third dose, vomiting and urging to stool somewhat relieved. In thirty minutes pulse 62, and extremities warm. The Camphor continued once in half an hour. At 11 o'clock the urging to stool ceased and was succeeded by involuntary passages from the bowels, not observed by the little sufferer. The thirst great all the time. By 12 o'clock M., pulse 75, and vomiting ceased, as also the involuntary passage from the bowels. The Camphor continued once an hour, with directions that if they slept, not to wake them to give the medicine. One or two doses only were given before they slept soundly and waked late in the morning, feeling extremely weak and *decidedly opposed to chewing bark*; otherwise quite well. I omit giving the symptoms of the other, as they were precisely alike in every particular.

The above was but just noted when I received the *American Homœopathic Observer* for April, containing the very interesting article on this remedy, by Dr. BURT. I have had but few opportunities of testing this powerful remedy, as yet, but I think you will, by trial, find it a very valuable medicine in diseases of the stomach and bowels, as well as those of the glandular system.

GELSEMINUM SEMPER VIRENS.

DR. HENRY BRADFORD communicates to the *American Druggists' Circular* the following:

GELSEMINUM IN HYSTERIA.

Some years since I had a troublesome case of hysteria; the case was a lady of about 40 who had injured her health seriously by dosing with patent medicines. After trying a great variety of medicines, with only temporary relief, knowing the sedative powers of *Gelseminum*, I gave that a trial, with complete success; and the lady abandoning her patent nostrums, soon regained good health. The above was seven years since, and she has been but little troubled with hysteria since. If she feels any symptoms of it, a dose of *Gelseminum* removes the trouble forthwith. Since her case, I have used *Gelseminum* for hysteria, almost to the exclusion of everything else. If it has gone to the extent of producing convulsions, I give chloroform by inhalation, sufficient to arrest the convulsions, but short of producing

anæsthesia; and then administer tincture of *Gelseminum*, twenty drops every hour, until it produces drowsiness. Sometimes the first dose is sufficient, and it rarely requires the third; then smaller doses, p. r. n., to keep the nervous system quiet, until the exciting cause, whatever it may be, can be removed, if possible. I would say, *en passant*, that I have treated three cases of hysterical convulsions in males; one was a boy of 14 years; the others, 22 and 30 years of age. All were of course of nervous, excitable temperament."

Gelseminum is doubtless an admirable remedy in hysteria, but it is not at all necessary to give massive doses. Drop doses would doubtless have been sufficient in the case reported by DR. BRADFORD, and drop doses of the first dilution, prepared from fresh tincture, will be strong enough in nearly every case.

Book Notices, etc.

THE UNITED STATES MEDICAL AND SURGICAL JOURNAL, a quarterly magazine of the homœopathic practice of medicine and medical science in general, edited by GEO. E. SHIPMAN, M. D., published by C. S. HALSEY, Chicago, Ills. Vol. I, No. 1, Oct. 1865. Octavo, 112 pps. \$3 per annum.

THE HAHNEMANNIAN MONTHLY, conducted and published by the Faculty of the Homœopathic Medical College of Pennsylvania. Published by A. J. TAFEL, Philadelphia. 48 pages. \$3 per annum.

We have here two new candidates for the patronage of the profession. The first is published under the direction of the "*Western Institute of Homœopathy*," and is wholly a Western enterprise. When the name of "U. S. Journal" was proposed, Dr. TEMPLE, a member of the Institute objected, saying "it would imply that all the States were to be represented, whereas it is essentially a Western journal, and should have a Western title."

The *Hahnemannian Monthly* is devoted to the advocacy of high potencies and the interests of the Philadelphia Homœopathic College.

The Introductory says:—"Some four years ago, a number of the oldest Homœopathic physicians met at New York, and agreed to support and sustain a Homœopathic Monthly Journal, devoted to the explanation and defence of the true Homœopathic principles, declaring that it was necessary to do so, as erroneous doctrines had led to

erroneous practice, and announcing that the time had come when the onward course of well-meaning, but ill-informed journals and teachers should be exposed and checked. In this manner and for that purpose originated the *American Homœopathic Review*, which has done incredibly more than was at first anticipated in the promulgation of true Homœopathy. . . . The friends of the *Review* have held yearly meetings to devise together how this great object could best be served. At such a meeting, held in this city on the 3d of June of this year, it was considered important, inasmuch as the number of Homœopaths and Homœopaths was rapidly increasing, and *as one journal alone* was no longer deemed sufficient to answer the purposes in view, to add another monthly paper."

Are the editors of the *Hahnemannian Monthly* really amusing themselves with the delusion that the "*American Homœopathic Review*" and their monthly are the only Homœopathic periodicals, and that those who think as they do are the only true Homœopaths?

Prof. AD. LIPPE, who appears to be the principal editor of the *Hahnemannian Monthly*, says, in one of his lectures, as quoted on page 138 of the "Monthly," "The Homœopathician is liberal, and contends that the whole scale, from the crude natural substance, up to the higher and highest infinitesimals, should be open to the choice and practice of every sensible and candid person."

This is admirable. But in reviewing Prof. HELMUTH'S work on diphtheria he breathes a very different spirit. He asks Dr. Helmuth "Does he also subscribe to Mr. Pope's heresy, that a man may believe in the potentiation theory or not; if he only claims to adopt the name he is "*all right*?" And does he still subscribe as before to the heresy of Dr. Holcombe, who, among other palpable absurdities, says, that if Hahnemannism was Homœopathy it would have been dead long ago? Does he join Pope and Hempel in the famous but scandalous testimony given at Toronto? And does he think all this a worthy effort to establish on a firmer basis the grand system of medicine, whose founder was the immortal Hahnemann? Immortal—but neither in such diphtheria "treatment," nor in Dr. Holcombe's slanders, nor in Pope's support of Hempelisms."

All this, with the use of such epithets as the following: "The sneering critic," "the eclectic," "the mongrel," "the materialist," "reckless," "unscientific," etc., etc., are entirely out of place. Instead of serving the cause of truth, he is merely engendering feelings of bitterness among those whose purposes are equally good. Professors Helmuth and Hempel, Doctors Pope and Holcomb, and a host

of other earnest workers, may not be Homœopaths according to Dr. Lippe's idea; but when at least four-fifths of the school highly esteem their labors, common courtesy calls for the use of more respectful language, and we think that unless it is intended to make hyper-criticism a leading feature of the "Hahnemannian Monthly," a change of tone will be advisable.

In typographical appearance the *United States Journal* takes the lead; in fact it is the best printed periodical we have had since the publication of the *United States Journal of Homœopathy*, which unfortunately failed after two years of publication. The present number is embellished with one very well executed wood engraving of the *Pulsatilla Nuttalliana*, and a colored lithograph, representing the eruptions caused by that drug.

The editor says "He will seek to make it a journal of progress—upholding nothing false because it is old, and has received the sanction of all past ages,—embracing nothing false because it is new, however endorsed by great names, or bedecked with specious pretences; seeking to imitate Hahnemann in his patient yet vigorous search for truth, in his casting off all trammels of caste and custom which could impede his progress, but not feeling at all bound to believe everything which he believed, or to do everything which he did. The Homœopathic school is not *done* yet—not ready to be fenced in and covered over—not ready to devise a bed on which every one must lie, nor set up a standard to which every one must conform. That which she demands—freedom of thought and action—she should be ready to grant, and welcome all as fellow-workers in the great labor of improving the science and art of Medicine, who sincerely devote themselves to this holy purpose."

We have now the *North American Journal*, the *American Homœopathic Review*, and the *Hahnemannian Monthly*, three magazines, two monthly and one quarterly, published in the East; the *United States Medical and Surgical Journal*, the *Medical Investigator*, the *Western Homœopathic Observer* the *American Homœopathist*, and the *American Homœopathic Observer*, four monthlies and one quarterly, published in the West. Why this disproportion? Why should not a city like Boston, having resident there some of the most talented Homœopaths in the country, publish at least one journal?

We are much gratified at the evidence of enterprise exhibited by these publications, and hope they will enter upon a career of usefulness and honor.

A MEMORIAL TO THE TRUSTEES OF THE FREE CITY HOSPITAL, with statistics and facts showing the comparative merits of Homœopathy and Allopathy, as shown by treatment in European hospitals. By ALBERT J. BELLows, M. D. Boston: Published by OTIS CLAPP.

When we know that in private practice the mortality under Homœopathic practice is not much more than half what it is under Allopathic, we should leave no honorable means untried to induce those who control our hospitals to permit the introduction of the new practice. In some of our hospitals dysenteric patients have been drugged with epsom salts, and death after death occurred in cases where the mild measures of Homœopathic practice would have cured. Typhoid fever cases of a severe type are expected to die. Hundreds of deaths occur, not naturally, in consequence of disease, but unnaturally, because of improper treatment. While this is so, the Homœopathic physician should not be satisfied with merely extending the circle of a profitable practice; its benefits must be tendered to the poor who throng the hospitals in all our large cities. Trustees may refuse, and Allopathic prejudice rule for a time, but it will be otherwise hereafter.

Dr. BELLows, in behalf of a Committee, presented to the Trustees of the Free City Hospital of Boston, a petition, signed by some 800 leading citizens, with a memorial, showing in a very lucid manner the difference between Allopathy and Homœopathy, and the superiority of the latter. By his admirable presentation of the truths of Homœopathy, he has conferred an obligation on the whole fraternity.

He sums up with the following conclusions :

1st. That in Physiology, Pathology, Nosology, and everything pertaining to the management of patients, except Therapeutics, the Old School and the Homœopathic agree.

2d. That in Therapeutics, Allopathists have no standard but experience, and no means of testing the value of medicine but experiments on the sick, which they have in common with all classes of empirics, and which they acknowledge to have been the means of killing millions of patients.

3d. That the result of all this sacrifice, and the experience of six thousand years, has only established the fact that six medicines are useful in as many different diseases, and that all other articles of the *materia medica*, as now used, are either useless or do more harm than good; but that, nevertheless, these dangerous experiments are still being tried in all our hospitals, some doctors having faith in one article and some in another.

4th. That Homœopathists have discovered a law of Nature by which, without experimenting on the sick, the virtues of all medicines

can be tested and the symptoms of disease ascertained, which each is adapted to cure.

5th. That, by the application of this law, over three hundred medicines have already been proved, and have the confidence of all Homœopathic practitioners, some fifty of which have been used for more than fifty years for the same symptoms of disease, and with the same satisfactory results; and that doctors who have practiced both ways declare that many diseases considered incurable by Allopathic treatment are proved to be curable by Homœopathic treatment.

6th. That it is susceptible of proof, that under the same collateral circumstances, Homœopathy will save fifty per cent. more of life than Allopathy.

7th. That it saves all the suffering from lancets, hot irons, caustics, cataplasms, emetics, cathartics, and the whole paraphernalia of torments which so terrify patients and so disgrace the profession, to say nothing of drug diseases which are entailed on almost all who take poisonous medicines in Allopathic doses; saves at least one-quarter of the time of the patient, and consequently one-quarter of his average expense of treatment, besides saving at least nine-tenths of the expense of medicines; and this last item is not inconsiderable, the Apothecary's Report for Bellevue Hospital for 1856 showing a disbursement of nearly five thousand dollars for drugs and medicines.

8th. That its doctrines and practices are all consonant with Nature's common laws, and all commend themselves to the common sense of all intelligent men who understand and practice them.

CACTUS GRANDIFLORUS. Translated from the original by AD. LIPPE, M. D.; Professor of Materia Medica at the Homœopathic College of Pennsylvania. Philadelphia: F. E. BOERICKE. 1865. Pp. 32.

The above is the title of a pamphlet which has lately been issued, and which may probably be read by those who have not already perused the proving of the "Cactus," which has appeared in the British Journal of Homœopathy, the North American Journal of Homœopathy, the American Homœopathic Observer, the American Homœopathic Review, and other periodicals. We have no doubt that the medicine in question will become, ere long, one of the polychrests, and from its peculiar sphere of action on the circulatory apparatus, will occupy a very conspicuous place in the materia medica of our School. That mistakes may have been made in the translations, may be very true, but that they are corrected in the "Preface by the Translator" with a wrong *animus*, is also to our mind a very palpable fact. The correction of *any* errors that may, *in any manner*, have been introduced into the materia medica, is not at all incompatible with a continuation of UNITY among homœopaths, but yet it appears not only in the preface of the pamphlet alluded to, but in very many articles that have of late appeared, particularly in the *American Re-*

view, that there exists a spirit which tends to divide the members of the Homœopathic School. Whether we look into the address before the Hahnemannian Institute, the letters to Dr. Pope, the "first hundred mistakes" that appeared in an obsolete sheet known as "the Homœopathic News," the criticisms upon writers of *materia medica* or other productions, we cannot fail to observe, in every single one of them, an under-current which savors of anything but an effort to establish on a firmer basis the grand system of medicine whose founder was the immortal Hahnemann. Let us illustrate our meaning. In the preface of the pamphlet, for instance, we find:—"The notes left out stamp Dr. Rubini to be a true Hahnemannian; by omitting them he may be claimed by 'THE OTHER SIDE.'" Those last three words are entirely out of place in a work which proposes to elevate the standard of *materia medica*. Does this "*other side*" mean the "Allopathic," or does the author believe there is now established, or that there will be forthcoming, two or more parties among the Homœopaths? There is no "OTHER SIDE" among true Homœopaths. There are, certainly, men who have dissimilar ideas with regard to the doses to be employed, but who *follow the great law of cure in the selection of their remedial agents*, and because Dr. A. may conceive the higher potencies to be better, or Dr. B. regards the exclusively low to be more beneficial, or Dr. C. would say that so long as there is exhibited in the human race a difference of form and feature, a difference of temperament, a difference in susceptibility to medicinal action, a difference in the mode of life, that different potencies are required; and yet each of these physicians selects his medicine in accordance with the symptoms, and follows the law *Similia similibus curantur* in the choice of the different means, there is no reason that Dr. A. should be placed one side and slurringly styled "a high dilutionist," or Dr. B. given another position and called "a non-homœopathist," or Dr. C. set apart as the representative of "another party" and designated as a "mongrel" or "a quack." There are a great variety of *Protestant* denominations in religion, but because one individual may be a Presbyterian and another an Episcopalian, they are none the less Protestants. Really, we believe that much bad feeling, not to say personal enmity, is engendered by Homœopaths allowing their ideas with reference to *dose* to bias them in their opinions of their brothers, who may perhaps be laboring in good earnest for the one great, grand cause of Homœopathy. At the last meetings of the Western Institute and the American Institute of Homœopathy, it gave us great pleasure to observe the unity of sentiment that prevailed upon this

point; and it should be the great effort of every member of the School not to separate it into factions, but to combine in one great harmonious system, which shall ever shed blessings upon the human family.

Again, we see, toward the end of "*The Preface*," that the Hahnemannian materia medica is styled a *caricature*, and that its claims to AUTHORITY are found in the fact that since the year of its publication "*no adverse reviews have appeared*." This materia medica was the work of considerable labor, and has very many articles and notes of great value to those who look for them. The absence of adverse reviews in literature neither "*makes or breaks*" any publication of any creed or any denomination. A work must stand upon its own merits. The unkind use of the word *caricature* is in no way applicable to the fasciculus in question. There have been other works on Materia Medica of which *but a single number* appeared, and which probably the translator has forgotten. Let us do away with this bickering, and let us labor in earnest for a good cause.—*Western Homœopathic Observer*.

THE USE OF THE LARYNGOSCOPE IN DISEASES OF THE THROAT; WITH AN APPENDIX ON RHINOSCOPY. By Dr. MORELL MACKENZIE, &c., &c. Published from the London edition, by Lindsay & Blakiston, Philadelphia, pp. 160. 1865.

Some little experience is required in the use of this new instrument, but with the aid of this very well-prepared manual, no very great difficulty will be encountered. Physicians who desire to keep up with the improvements of the age should procure the book.

NEW YORK HOMŒOPATHIC SOCIETY TRANSACTIONS.—We have a few copies left of this very valuable volume, which we will send with pleasure to any of our subscribers who will remit the postage, 24 cents.

WHAT IS HOMŒOPATHY? and Why is it safer and better than the old practice of medicine? By L. BARNES, M. D.

An excellent tract for general distribution.

We are under obligation to D. E. SMITH, M. D., for a copy of "*Proceedings of the Eclectic Medical Society of the State of New York, 1862*."

THE PHYSICIAN'S VISITING LIST, DIARY, AND BOOK OF ENGAGEMENTS, for 1866. Published by Lindsay & Blakiston, Philadelphia.

Well bound, good paper, and quite convenient.

PLAIN DIRECTIONS for the treatment of Cholera and Epidemic Diarrhœa, and for their prevention, by WILLIAM BAYES, M. D., (Hon.)
Published by HENRY TURNER & Co., 77 Fleet-st., London, England.

Should the Asiatic Cholera again visit our shores, small works of this kind, (8 pages octavo) with the requisite medicines should be supplied to all Homœopathic families, that the premonitory diarrhœa may be promptly met, and even severe symptoms relieved. When the physician arrives, he will then find it quite easy to conduct such cases to a favorable termination.

Societies.

PROCEEDINGS OF THE CANADIAN INSTITUTE OF HOMŒOPATHY.

In response to a call pursuant to a resolution passed at the January meeting of the homœopathic practitioners of Canada West in 1863, the following named gentlemen met at the Masonic Hall, in London, Sept. 20, 1865, to organize an Association, through which the combined efforts of the profession may be directed to the advancement of the cause of homœopathic medicine in Canada:

William Springer, M. D., of Ingersoll; G. C. Field, M. D., of Woodstock; J. J. Lancaster, M. D., of London; E. Vernon, M. D., of Hamilton; F. G. Caulton, M. D., of Guelph; C. T. Campbell, M. D., of Strathroy; L. F. Crawford, M. D., of Hamilton; R. J. P. Morden, M. D., of London; A. H. Thompson, M. D., of St. Thomas; H. C. Allen, M. D., of Brantford; A. T. Bull, M. D., of Buffalo; T. P. Wilson, M. D., of Cleveland, and E. A. Lodge, M. D., of Detroit, besides several students, and numerous friends of the cause.

On motion, Dr. Field was appointed temporary Chairman, and Dr. Allen temporary Secretary; and a committee consisting of Drs. Vernon, Lancaster, Springer, Crawford and Allen, appointed to report a permanent organization.

The committee reported a Constitution and By-Laws, with the following officers:

G. C. Field, M. D., President; J. J. Lancaster, M. D., Vice President; H. C. Allen, M. D., Secretary and Treasurer, which was unanimously adopted.

Dr. Springer moved, seconded, by Dr. Caulton, that Drs. Morden, Vernon and Crawford, be committee on credentials. *Carried.*

Moved by Dr. Morden, seconded by Dr. Springer, that the fee for membership be one dollar, and the annual fee the same. *Carried.*

On motion by Dr. Springer, seconded by Dr. Crawford, Prof. T. P. Wilson, of Cleveland, Dr. E. A. Lodge, of Detroit, and Dr. A. T. Bull, of Buffalo, were elected honorary members, and invited to participate in the proceedings.

A letter was read from Dr. E. H. Drake, of Detroit, regretting his inability to attend the convention, but admonishing the members, that as "the welfare of the race was involved in the success of homœopathy," they should be zealous in maintaining the honor of the cause.

The President then called upon Dr. Lodge to address the Convention, which he did, in substance, as follows :

I am pleased to meet the homœopathic physicians of Canada on the present occasion. The objects of your Association are of interest to us all. We think it will be found that these organizations perform services to the whole fraternity, that could not be rendered by individual effort.

I present a word of friendly greeting from the *Michigan Homœopathic Institute*. We desire to cultivate your friendship, and will send delegates to your meetings. We hope that you will reciprocate. We shall always warmly welcome your representatives, and cordially invite them to participate in our deliberations.

We hail with emotions of gratitude, every effort that is made to extend the knowledge of our system of practice, and to improve the present standing of the profession. To advance our art we are devoting some little attention in Michigan. Of my own efforts it does not become me to speak, and I will merely state the fact, that our Magazine, "*The American Homœopathic Observer*," is the only Medical Journal now published in the State of Michigan. Some years ago, our Legislature appointed a chair of homœopathy in the State University. By the culpable neglect of the Board of Regents, this chair yet remains vacant. The people expressed their desire to have homœopathy placed on a footing of equality with allopathy, and this is right. Under our government no system can properly claim exclusive patronage or support. The allopaths cannot demand that their students shall be educated at the expense of the State, but ours must go out of the State to be taught. We do not intend that this injustice shall be perpetuated if we can avoid it.

When I came to Michigan seven years ago, there were one hundred homœopathic physicians in the State. Now we have over two

hundred, and many very desirable locations unoccupied. Our cause may not have been as rapid here as in some other places, but the advance has been steady. We have had no permanent repulse. Our whole line has been strengthened, and we are prepared to resist every opposition.

An unmistakable evidence of true progress, is found in the increase of our literature. Notwithstanding the doubling of the cost of production, new books and new magazines succeed each other with rapidity. A laudable degree of emulation has been aroused, and good will doubtless result.

Additional provings of our indigineous plants are being made. The first book edited by Dr. Hale was merely the pioneer in this direction; more complete works will follow.

Our Colleges advance the requirements preliminary to graduation. A host of talented young men are studying in offices of our physicians. The classes of the coming winter in our Collegiate Institutions will doubtless be larger than ever before. A mere glance at what has been already accomplished, and what is now doing, must encourage each one of us to work with still greater fidelity for the universal establishment of our beneficent art of healing.

After some discussion and remarks on the above, Prof. Wilson, on being called, said :

Gentlemen of the homœopathic fraternity of Canada:—It is with unfeigned pleasure I meet you on this occasion, and extend to you the cordial greeting of my medical brethren of the States, and receive from you, for them, the warm and unmistakably genuine sympathies you give in return.

Annexation I know is a vexed question with you, on which a multitude of words and small oceans of ink have been used; and heaven forbid I should add aught to their number. But standing here, I realize that in spite of all opposition, the course of events is irresistably solving the problem for us. For the two great nations, lying one on either side of the great chain of lakes, like counter tides in their flow, are surely and swiftly rushing into each other's arms. The great treaty of reciprocity under which we have been so pleasantly and profitably living, has long been the ensign for our *commercial* annexation. And when that treaty shall be broken, as we know it soon must, its fractured links will be gathered up, and welded into a new and stronger chain, which shall be a new and stronger bond of union between the Canadian provinces on the north, and the United States on the south.

But whether we shall ever become one politically or not, I know not; or whether you desire it or not, I know not, and I care not to stop now and inquire, but I shall ever count this as one of the proudest days of my life, that I have been privileged to stand here, and aid in the formal inauguration of this second element of our union. For we are henceforth, in a medical sense, no longer two people, but one. For our common faith in the great law of our school of reform, shows a community of interests and ideas, binding us together with more potent cords, than any edicts that ever issued from thrones or senates.

I know of no topic so engrossing the public mind, as the one I have just referred to, namely: the relation existing between the Canadian Provinces and the United States. And though to some its discussion here may seem somewhat out of place, I shall venture to still further refer to it, though not in the same light as it has been quite recently and ably discussed, in the recent great International Commercial Convention, whose proceedings have filled all our weekly and daily papers.

In a medical and surgical view of the case, it seems to me, that the union of these two nations, such as it is, and such as it is to be, is not the result of "union by first intention." The first intention seems to have been, to build up on this broad and beautiful domain of the north, a French colony, subject to the French crown. And for a number of years the growth and development of the country resulted in the formation of a peculiar structure, which I think we may term French tissue. And though I have not been privileged to see much of this, your French anatomical structure, still I have reason to believe it a useful and durable portion of your body politic. But history informs us, that subsequently a new formative force was brought into play, which exceeded, and in some degree, paralyzed the primitive force, and, bringing in along the arteries of the world's great highways, a large amount of plastic material, built up another sort of structure, a little rougher, tougher and more enduring, which I think we may term English tissue.

It is characteristic of morbid structures, that they are prone to absorb and displace surrounding structures. And since this English growth, instead of absorbing and displacing the primitive growth, sought new and adjacent fields for development, I conclude that it may be set down as perfectly normal. And though there are essential differences of character between you, yet there are no anatomical or physiological reasons why you should not form a strong and harmonious whole.

Blest as you are with the richest of nature's gifts, with a magnificent forest, holding its full hands over a rich and fertile soil, beneath whose fair surface are bowels pregnant with untold wealth, the "second intention" seems to have been, to make here a rich and powerful nation, self-supporting and independent, save a quasi dependence on the English crown. But as contiguous, and often even remote parts on the same body, are in lively sympathy one with the other, so these northern provinces, standing on the same continent with the United States, have not failed, in spite of themselves, to be powerfully affected in all their relations, especially in their commercial and political interests, by the latter nation. And though at times a repellant influence has manifested itself, yet the natural course of events has been, to draw these two nations together into kindlier, closer and more permanent fellowship. And although neither of us shall lose our identity, neither absorbing or being absorbed, yet we may hopefully trust that we may continue to be linked together by ties that shall blend us into one great living form, which to antagonize or disintegrate in any of its parts, would be to destroy.

The recent state of ill health suffered by us across the water, has undoubtedly awakened in your hearts the liveliest sympathy. We have indeed been sick unto death, but I presume you have heard of our miraculous recovery. The disease which for four long years has fired our blood and brain, has, thank God, at last reached a favorable crisis, and we are convalescent. In some of our delirious moments we may have talked madly. You may have heard us uttering words of scorn, and threatenings against you as well as others of our friends; but now, clothed in our right minds, we can never have other than words of good will for all who have stood so nobly by us in the hour of our sorest need. Like the prairie swept by fire, and like the field torn by the plow, we are springing up into a rich and better harvest of new and better fruits.

At one time during our sickness, dangerous and fatal sloughing seemed most imminent. Our whole southern border threatened gangrene, but the timely application of potent remedies, has brought about a favorable resolution. And as we have in no instance been obliged to appeal abroad for help, but have cured the malady by our inherent resistance of its effects, we may set the affair down as due simply to the *vis medicatrix naturæ*. There were very many famous consultations held over our case, during our darkest hour; but the doctors in law who proffered their advice, and made sundry and divers prescriptions, did so voluntarily, and I'm afraid they were very poorly paid for their services.

Still, on our recovery, we find a pretty heavy doctor's bill to pay. But since we owe it principally to ourselves, it cannot matter much to our neighbors whether we pay it or repudiate it. But I dare to say, that before *repudiation* shall be written over our doors, the disenthralled millions of negroes, whose parchment of freedom bears the signature of the lamented and immortalized Abraham Lincoln, would, through their own thrift and sense of justice, pay every dollar of the debt. And you, gentlemen, holders of American bonds, may rest assured that you have the security of their payment, both in *black* and *white*.

During the last four years, our school of medicine has labored under unusual disadvantages, owing to the fact that the sanitary and medical departments of our army and navy, have been wholly in the hands of a class of monopolizing and bigoted medical men, who knew no right of homœopathists that any allopathist was bound to respect. Still, we have grown marvellously, and the close of the war has given us such an impetus forward in the path of progress, that you will need, gentlemen, to look well to your laurels. But I have most unbounded confidence in your intelligence and success. I think, in looking round upon this body of honorable medical men, that I can say to my medical brethren of the States, that the cause of homœopathic medicine in Canada is in safe and reliable hands. May the spirit of our great master Hahnemann descend upon you, as did Elijah's mantle upon Elisha, and under its inspiration may your labors for truth be crowned with abundant success.

After some further remarks by different members, the President called upon Dr. Allen, who read an article on the importance of cultivating a domestic practice in our different fields of labor, which elicited a discussion, Drs. Springer, Mordon, Caulton and others participating.

Several calls were made for an article from the President, but owing to the lateness of the hour, it was deferred until the evening session, and a motion was carried to adjourn.

EVENING SESSION,

The Institute met at 7:30 P. M., at which time the following paper was read by Dr. Field:

MEDICAL EDUCATION.

GENTLEMEN:—It is presumed that no one will call in question the imperative necessity that exists for raising as high as possible the standard of medical education in Canada. Many considerations con-

aspire to render a superior education of the Homœopathic section of the medical profession most desirable. It is necessary, in the first place to relieve ourselves from the charge of ignorance, which has been preferred against us by our professional brethren of the antiquarian school; which charges, though unjust in the main, still, it must be confessed, that in some instances, perhaps, there was too much ground for the imputation. Arising mostly, I believe, from over zealousness, or from that "zeal without knowledge" which characterized some of the earlier physicians, in their efforts and anxiety to extend the principles and practice of our beneficent system; who were apparently oblivious of the fact, that incompetent persons, wherever found, in whatever walk of life, but particularly in the practice of medicine, and more especially in promulgating new principles, in the advocacy of a new theory, could only constitute an element of weakness rather than of strength. No one would claim for a moment that forcing into service, as soldiers, men whose arms were too weak to draw the sword from its scabbard, or to whose imperfect vision objects were rendered uncertain and indistinct, compelling them to fire at random, and thereby endangering the lives of their friends as much as their enemies, could possibly add anything to the strength or effectiveness of an army.

The attitude of the dominant school toward all dissenters in medicine, in its menacing display of legal weapons, and the paraphernalia of war, has been that of a belligerent autocrat. Indeed it could only be expected that a system, towering as it were to the very heavens with its vast colossal proportions, and whose anchor was cast and firmly fixed in the very groundwork of society; a system that boasts of its antiquity, that has grown arrogant from the possession of conscious power, whose interests were interwoven with almost all existing interests, and whose influence extended through all grades and classes of society, and whose ubiquitous presence reached to all conditions of life. I say it was only to be expected that such an institution would look with extreme jealousy upon the birth of all counter institutions, and that it should use every means in its power for their speedy demolition. In the case of Homœopathy, which first saw the light in Germany, it was regarded by Allopathy as its natural and implacable foe. The established school felt that its tendency was antagonistic and subversive of its own power; and perhaps with a little gift of prophecy it foresaw its ultimate triumph. Still it affected to believe that this new heresy could not survive its infancy. British and American physicians hoped their peace of mind would never be disturbed

by its presence, but that it might die and be buried in its father land. But as it showed great tenacity of life, and still persisted in living, despite the uncongenial atmosphere by which it was surrounded, and in defiance of the anathemas hurled against it by the high priests of the ancient doctrine, their lowering brows and frowning indignation became "terrible as an army with banners." But now, when it has become a vigorous youth, and has extended itself throughout the civilized world, and flourished *best* where there is *most* civilization, their fear has fairly taken the alarm.

The querest asks, What has this digression from the main subject to do with Medical Education? I reply, to prove its necessity by showing the antipathy that exists, and the persistent warfare that is being carried on between two systems diametrically opposed to each other. The one goes into the contest with the *prestige* given it by age, and power, and popularity, and wealth, and uses as a weapon the strong prejudices peculiar to human nature. The other, like David as he went forth to slay the giant Goliath, goes to do battle with its enemy with but a sling and pebble; the sling is a law of Nature, immutable and eternal, and the pebble is successful practice. But what is its coat of mail, what is the cuirass with which it defends itself from the thrusts of its adversary, and constitutes at the same time the strength and skill with which it uses the sling in throwing the pebble? I answer, education. Both medical and general. In individual practice his coat of mail must be perfect, or through its open seams a dart may penetrate, to his complete discomfiture. He may rest assured that every individual adherent of the ancient system stands as a sentinel to watch his movement, and will contest, and circumvent, and demolish him, if possible; less, perhaps, at present, by open enmity, than by duplicity and intrigue. The conviction of my own mind is, that in view of the active hostility of the opposing school, in view of the ceaseless vigilance of this argus-eyed institution, which is sure to detect every indication of ignorance, and which like Briarius with his hundred hands, can reach in every direction and grasp at every mistake, it behooves us, from an instinct of self-preservation, to be "wise as serpents" and for the preservation of our patients to be "harmless as doves."

The Homœopathic physician, in his daily practice, may consider himself encircled by a multitude of spies, who have keen eyes fixed upon every movement. They see everything he does. He may be sure that every incorrect diagnosis, every mistaken prognosis, every mistake of whatever kind he may commit, will be instantly paraded

before the public by this many-mouthed monster. Mistakes, perhaps trivial in themselves, yet in their passage from one to another swell into mammoth proportions. In another and more public way his knowledge may be put on trial, as when from some accidental death or death from poisoning, he may be required to give evidence in a court of law. He may then expect to be subjected to an examination the most rigorous and searching that Allopathists can prompt the counsel to make; less for the purpose of eliciting evidence in the case than for the purpose of exposing his ignorance. He may be sure that his knowledge of chemistry, toxicology, anatomy and physiology, will be tested to the very utmost of their ability, and woe betide him if they discover his weak points, for he is in the hands of a merciless inquisition. The reasons here given for a high degree of mental as well as medical culture, you will perceive spring from within us, and are partly the promptings of self-interest and of self-preservation, and partly from an inherent love of truth; and while I think them sufficient to induce every member of the profession to aim at the highest point of excellence attainable, still we should not be forgetful of the fact that there are other and extraneous reasons—reasons which spring from without and beyond us, tending to the same high end. We cannot if we would shut our ears to these mandates from without. They are voices from society and from the world at large. They tell us that the people of to-day demand of us a greater perfection of knowledge, a higher and broader range of acquirements, than did our ancestors of thirty years ago. This demand arises from the changes which have taken place within that period of time. As witness the change in the inhabitants and in the face of the country. The “oldest inhabitant” can perhaps remember when primeval forests covered all this part of Canada; when the very site of the fine city of London was a howling wilderness,—the hunting-ground of the painted savage. But what a change! As if with the waving of a magician’s wand the forest solitudes, and wild, red Indian, have disappeared together, the hunting-grounds have changed into fruitful fields and the wigwams into flourishing towns and cities. The half-naked prowling savage has given place to the well-dressed gentlemen and beautiful ladies who promenade the streets of this flourishing city. The seat of barbarism has become the home of civilization and refinement! Education is becoming more general and runs in deeper channels. Academic and Collegiate institutions are springing up in our midst, and are rapidly changing the mental character of our people, and with each successive stage of development new wants are created and new demands are

made. All these things demand of the physician a fullness of knowledge, not only as pertaining to medicine proper, but a thoroughness in all the exact sciences which a former generation did not require at his hands. I do not hesitate to express a belief that the advance which has been made in the last thirty years in all the arts of civilized life, and in the development and perfection of science, is not to be compared to what the next thirty years will witness. Some suppose now, as did the ancients, that science is perfect, and that the inventive faculty of the human mind has exhausted its resources, or that there is nothing more to invent. But those who think so will find themselves as much mistaken as did the people who lived and thought the same things before the days of steamboats, of railroads and electric wires. Why, the human mind is but just waking up to a realization of its marvellous powers. There are thousands of the best minds in the world that are silently but zealously engaged in the solution of new problems, and in the development of new principles of science. There are also thousands of adventurous spirits out upon voyages of discovery, pushing in every direction as if to ransack the world. They penetrate the thickest jungles of the torrid zone, and tempt the dangers of the polar seas. They scale the highest mountain summits and descend into the deepest chasms in quest of whatever is rare or precious, or useful, in nature, and their returns will also contribute to swell the general stock of knowledge.

In keeping with this spirit of progression we ought also to be pushing forward our inquiries and investigations into the "regions beyond." We ought not to settle down upon "*similia similibus curantur*," and think that knowing it there is nothing more to be learned. The great medical arsenal of Nature is not yet exhausted of its weapons with which to combat disease. There is a terra incognita which needs to be explored. Doubtless there are remedial agents in our fields and forests, among their flowers, and trees, and roots, of invaluable worth, if we but knew them and their uses. We might question ourselves in reference to the nature of disease as well. In reference to pathology, and the causes operative in changing and modifying pathological manifestations, there is much of mystery and obscurity remaining to be cleared away by future investigation and research. **As why are certain diseases peculiar to certain stages of life? Why do adults never have the croup? And why are the external indications of an inward abnormal condition ever varying, like the changing views in a kaleidoscope? Why does a storm herald its approach by sores and pains in rheumatic subjects when as yet no cloud is visible**

to the eye? Febrile diseases of the remittent type, in England amenable to certain remedies, frequently resist the same treatment as they appear in the littoral districts of France or upon the Irish coast. Intermittent fevers, which we readily cure in Canada by the use of certain means, will probably find those means a signal failure as the disease prevails along the Mississippi and some of its tributaries. Do climacteric changes, individual idiosyncracies, electrical changes in the state of the atmosphere, and climatology, sufficiently explain these phenomena?

But a matter of greater practical importance is indicated by the suggestion of Teste, viz: that those places most favorable to the growth of certain remedial plants, is also most favorable to the production of certain pathological conditions, which conditions will be found to correspond to the pathogenesis of those very drugs. Corroborative of this opinion he has pointed out that the *Dulcamara*, which is best indicated in complaints arising from exposure to a cold, damp atmosphere, grows mostly in localities damp and shady, and the curative sphere of *Aconite* which grows in the cold, dry atmosphere of mountain summits, corresponds best to acute inflammatory fevers peculiar to high mountain regions; while *Nux* and *Colocynth*, *Ipecac.* and *Ignatia*, so useful in the treatment of bilious fevers and hepatic diseases of different kinds, are found in the low hot latitudes of the South, where such fevers and derangements most prevail. The best antidotes for the bites of poisonous serpents are to be found in all cases where they are known in the very places infested by such serpents. As if Nature, wherever it had placed an enemy to human life, had also placed at the same time and in the same place, a weapon of self-defence. Doctors differ in opinion. For while the British physicians repudiate the whole theory as wild and chimerical, it is adopted by some of the Americans as embracing an important principle in therapeutics. Is there any truth in Teste's idea? If there is truth in it, then it ought to stimulate us to begin, and to prosecute vigorously the proving of indigenous plants, and emulate the example of our American brethren in this direction. There is here abundant room for investigation. And that, gentleman, I conceive to be one of the grand objects of our Association,—to aid and inspire each other with ardor in the pursuit of knowledge. The ideas of one mind may suggest to another some valuable thought, which, followed out, will lead to important results. It is in this manner that most of the practical knowledge we have in reference to physiological laws and pathological conditions has been obtained. As an illustration, you

know that at one time in the history of medicine it was believed that the process of digestion was altogether mechanical. Borelli, Keil and Pitcairn, taught that the food ingested was ground down or triturated by the muscular coating of the stomach, which they averred done its work with a force equal to a weight of 117,080, while the surrounding muscles contributed an equal pressure toward the same end. And doubtless they thought the world much indebted to them for giving a mathematical demonstration to the hitherto very indigestible problem of digestion. But in time Cheselden hinted that there might be a menstruum secreted somewhere in the digestive system possessing solvent properties which would obviate the necessity for such an enormous mill-stone operation. This solvent he believed to be the saliva. He was wrong in this, but his hint led to an exploration of the alimentary canal, by Haller, Reaumur and Spallanzani, who detected the gastric juice and demonstrated its solvent properties, and thereby dispelled the absurd and speculative theories of digestion. Thus it is that mind being brought in contact with mind, from a mass of crudities and absurdities, the truth is at length evolved.

The great object of all medical treatment is the prolongation of human life, and if a practical application of the principles of science contribute to this end, it follows that an increase of scientific knowledge and an increased number of therapeutic agents would give to human life a greater security than it at present enjoys against the fatal issue of disease. The Homœopathic system being most scientific of all others, should afford this greater security. And undoubtedly it does. So says the London Life Assurance Co., and has deduced from its recognition of the fact an important practical result. By a system of calculation the most perfect, and by careful observation, it finds itself able to assure the lives of such persons as are Homœopathically treated, at a cheaper rate. This action of the Life Assurance Co. is most gratifying to every lover of Homœopathy, as it affords the most incontestible evidence of the superiority of our system. If there are any faint-hearted or weak-kneed practitioners in the country let them gird up their loins and take courage, "for by this sign shall we conquer." Slowly, it may be, but surely, it will eventuate in the universal recognition of its superiority, as certainly as that ignorance must recede before the advance of education—as surely as that error must succumb to truth.

There is another matter I may notice in connexion with medical education, which rather bears upon the *moral* qualities and responsi-

bilities of the physician, and refers to his duty as a citizen, viz: to give whatever instruction he can to the people, that they may prevent the invasion of disease. He who withholds such information when it can be given, or neglects to advise the use of such prophylactic measures as might save the community from the ravages of an infectious disease, for the sake of "filthy lucre," conspires against the lives of his neighbors, and is guilty, only in a lesser degree, of the monstrous—the shocking immorality of Blackburn—the other name for infamy. Not only in specific cases, but in a general way, people may be taught the laws which govern their organic life, the observance of which will insure health, and the infraction of which will produce disease. By teaching them the effect of hygromeric changes, of miasmatic and telluric influences, which impinge upon the laws of health from without, and of morbid agents, which produce disruptions from within, the average duration of human life may attain its maximum; and the highest, noblest function of the physician's knowledge will have been performed. It should be as much a part of the physician's education to understand the prevention of diseases, as to treat them successfully when they prevail.

In conclusion, I think we may congratulate ourselves upon the advancement Homœopathy has already made in Canada, as well as upon the more rapid progress it is now making. Not a score of years have passed away since there were but one or two practitioners in this country, struggling for existence. We should not forget to make honorable mention of these pioneers of our system, for nobly did they battle for the truth in many a fierce encounter, firmly and successfully they defended their principles against the assaults of their ruthless enemies, and the graduates of to-day have reason to thank them for it. Homœopathy is no longer a reproach. It has its admirers and patrons in the most refined and cultivated circles of society, among the best and noblest, and most highly educated in the land.

A steady adherence to principles, firmness of purpose and an uncompromising integrity of character, that will not stoop from its exalted position as the expounder of Nature's laws, to hold parley with empiricism, and make degrading and retrogressive concessions to Allopathy are the characteristics necessary to insure a victory complete.

The following committees were then appointed, and subjects assigned for the next regular meeting of the Association. The annual address to be delivered by the President, Dr. Field.

On Publication—Drs. Springer and Allen.

- On Surgery—Principles and Practice—Dr. L. F. Crawford.
 On Surgery—Operation and Clinical—Dr. C. T. Campbell.
 On Pathology—its importance to the homœopathic physician—Dr. D. Campbell, of Toronto.
 On Obstetrics—Dr. J. J. Lancaster.
 On Clinical Medicine—Cases cured by one remedy—Dr. R. J. P. Morden
 On Materia Medica and Therapeutics—Dr. Wm. Springer.
 On Chemistry—Dr. J. W. Ferguson.
 Theory and Practice—Dr. John Hall.
 On Provings of Indigenous remedies—Dr. Thos. Nichol.
 On Dose—Dr. F. G. Caulton.
 On High Dilutions—Dr. E. Vernon.
 On the Single Remedy—Dr. G. F. Clark.
 On Medical Electricity—Dr. J. Adams.
 On Medical Ethics—Dr. Oliver Springer.
 On Physiology—Dr. G. E. Husband.
 On Medical Jurisprudence—Dr. Geo. Logan.
 On Alcoholic Stimulants—Dr. Peter McDonald.
 On Homœopathy—Drs. L. Oliver and C. D. Tufford.
 On Anatomy—Drs. A. H. Thompson and A. N. Tisdale.
 On Epidemics—Drs. M. E. Tripp and J. H. Lancaster.
 On Medical Botany—Drs. J. W. Tripp and W. H. Graham.
 On Toxicology—Dr. Havens.

Dr. Springer moved, seconded by Dr. Morden, that the next annual meeting of the Institute be held in the city of Hamilton, on the second Wednesday in May, 1866. *Carried.*

A vote of thanks was then unanimously given the homœopathic physicians of London, for the attention and hospitality shown the members of the Institute, during the session, after which the Institute adjourned.

G. C. FIELD, M. D., *President.*

H. C. ALLEN, M. D., *Secretary.*

MASSACHUSETTS HOMŒOPATHIC SOCIETY.

The semi-annual meeting of the Massachusetts Homœopathic Society was held in the vestry of the Tremont Temple on Wednesday, October 11, 1865. The members were called to order at 10½ o'clock by the President, Dr. Wm. F. Jackson of Roxbury. Dr. I. T. Talbot of Boston, the Secretary, read the records of the last meeting, which were adopted.

By request of the Society, Dr. J. E. Linnell of Worcester, the President of last year, read an address which he had prepared for the

last meeting, but was prevented by sickness from delivering at that time.

After some allusion to the circumstances of the time in which the address was written (April last), Dr. Linnell paid a tribute to the memory of Doctors Wild, Swan and Baker, members of the Society, deceased. The Society commenced its labors in 1840 under the name of the Fraternity, and has now 119 members. The condition and prospects of the Association, and also of the homœopathic system generally, were considered. He suggested the establishment of a fund for prizes to be offered for essays on important subjects. Also, that at least two essays should be prepared on given subjects to be read at the annual meetings.

The subject of medical education was considered, and the elevation of the standard of homœopathic schools, as a means of relieving the young students of the influences of the allopathists. The demand for homœopathic physicians is in excess of the supply. The duties pertaining to membership were ably treated.

The address was listened to with interest, and was referred to the committee on publication.

The balloting for proposed members now took place, and the following gentlemen were elected :

For members—Lewis G. Howe, M. D., of Bridgewater ; Giles M. Pease, M. D., of Boston. For corresponding members—H. D. Paine, M. D., of New York ; Elial T. Foote, M. D., of New Haven, Conn. ; E. M. Hale, M. D., of Chicago, Ill. ; E. C. Witherill, M. D., of Cincinnati, Ohio, R. E. Dudgeon, M. D., of London, Eng.

The President welcomed Drs. Paine of New York and Barrows of Providence, delegates from the homœopathic Societies of their States.

The Secretary presented a printed memorial, read by Dr. Carroll Dunham, of New York, before the American Institute at Cincinnati, in relation to a mutilated sixth edition of Hahnemann's Organon, published by Arthur Lutze, of Coethen, Germany, and calling attention to the unanimous protest of the German press against it. Dr. Talbot offered the following preamble and resolution in regard to this subject, which were unanimously adopted :—

Whereas, It appears that a mutilated edition of Hahnemann's Organon has recently appeared, from the press of Mr. Arthur Lutze of Germany ; and whereas, various societies and associations of physicians have, in the strongest terms, protested against and expressed their disapproval of such an act ;

Resolved, That the Massachusetts Homœopathic Medical Society entirely discountenances such an act, and can only characterize as literary vandalism of the most obnoxious character, the attempt to change the expressions and sentiments of an author long deceased, especially when those opinions have been carefully matured through a long life time, as was the case with the illustrious Hahnemann.

Dr. Linnell of Worcester read a paper on the establishment of a Homœopathic Life Insurance Company in New England, and read a circular from the Hahnemann Life Insurance Company of Cleveland, Ohio, offering to insure patrons of homœopathy at ten per cent less

than other persons. On motion of Dr. E. P. Scales of Newton, the chair appointed Dr. Linnell, Dr. Thayer of Boston, and Dr. Greig of Boston, a committee to consider the subject and report at the present meeting.

Dr. Chase of Cambridge read the report of the committee on pharmacy, recommending certain medicines to the patronage of the profession.

The same gentleman presented a report from the committee on *Materia Medica*, describing the Ordeal bean of Calabar, the tincture of which has been used as an opthalmic medicine for inducing contraction of the pupil. The report embraced accounts of provings of this medicine by Dr. Chase and others, to ascertain its other medical virtues.

Dr. Chase also read a report by Dr. James P. Paine, of a case of poisoning by Tolu Anodyne, a preparation of *Cannabis Indica*. Referred to the committee on publication.

Dr. Linnell of Worcester, from the committee on insurance, made a report recommending the appointment of a committee to memorialize the Legislature for a charter for an Insurance Company on the homœopathic principle. The report was accepted, and the same committee were instructed to prepare and present the memorial.

Dr. Barrows of Providence, R. I., read an extended account of the case of a young lady of that city, affected in a remarkable manner by spinal disease, hallucination and clairvoyance, relating many marvellous performances by her in her abnormal state, such as reading with her eyes closed, or in the dark with the book inverted; writing with a paralyzed arm, over which she had no control; composing Latin poetry, when asleep or when awake, never having studied that language; and many other curious freaks. The thanks of the Society were extended to Dr. Barrows for his interesting and valuable paper.

The committee of arrangements now reported that with the aid of several Boston physicians they had accumulated a mass of materials in an adjoining room, which they were unable to dispose of without the assistance of the Society. The President invited the members to repair to the apartment alluded to, where an elegant and abundant collation was found. Dr. David Thayer, of Boston, moved that the subject matter before the Society be taken from the table, and the motion was unanimously adopted.

On re-assembling, at 2 o'clock, Dr. Thayer read a paper on the beneficial effects of *China officinalis* in biliary calculi, claiming that China is a radical cure for gall stones. The subject was discussed at length by several members.

On motion of Dr. Talbot, Mr. Otis Clapp, of Boston, was invited to address the Society on the subject of the approach of Cholera, and its treatment. He related from his own knowledge the successful course adopted by the homœopathists of Cincinnati in 1858 and 1859, for precaution against and treatment of Cholera, by which they achieved a great reputation; and advised the homœopathic physicians of Boston to adopt similar measures. Mr. Clapp thought the medical

profession should urge boards of health to do their duty in guarding against the epidemic. Drs. Talbot, Angell and Chase were appointed a committee to consider the subject.

Dr. Cate, of Salem, Chairman of the committee on clinical medicine, read Dr. Greig's report of his practice for the year ending Oct. 1, 1865, involving a treatment of 1980 cases, of which but nine proved fatal. Reports of other physicians were embraced in Dr. Cate's report, which was accepted.

Dr. Paine, of New York, corresponding member of the Society, thanked the members for the courtesies extended to him, saying that he should visit the meetings of the Society frequently, and perhaps present some paper or essay at his next visit.

Dr. Barrows, of Providence, made a brief statement, representing an encouraging progress of homœopathy in Rhode Island.

Letters from several absent members were announced by the Secretary, who read a letter from Dr. Carroll Dunham, of New York city, on scarlatina renalis, and the remedies for the disease. This letter was referred to the committee on publication. Dr. Dunham sent a recommendation of Dr. Hering's work on "Materia Medica," and the Society, on motion of the Secretary, adopted a resolve commending Dr. Hering's efforts to improve the homœopathic Materia Medica.

Dr. Talbot, the Secretary, called the attention of members to the Home for Incurable Consumptives, established in Boston by one of the members of the Society, Dr. Cullis, a letter from whom was read, setting forth the beneficent object of the institution, and inviting members to visit it.

The meeting then adjourned until the next semi-annual session.

CLEVELAND HOMŒOPATHIC COLLEGE.

The Cleveland Homœopathic College has opened its winter session of lectures under the most flattering auspices. The failure of Dr. E. M. Hale to fulfill his agreement in supplying the chair of Materia Medica, will be no loss to the school; but the apparent bad faith shown toward the College by Dr. H., requires this public disapproval of the course he has seen fit to pursue. Dr. GEO. W. BARNES, an honorable and talented gentleman, a physician of large experience, and a man capable of doing honor to the position, will fill the chair of Materia Medica.

In behalf of the Faculty,

T. P. WILSON, *Registrar*.

[That Dr. Hale should prefer lecturing at Chicago, where he resides, to Cleveland, which is perhaps 350 miles distant, is easily understood; and in expectation of a call from the Chicago College, we should suppose that his acceptance of the Professorship at Cleveland, would not have been unconditional. If Dr. H. has given any just ground of complaint, we shall regret it very much. Equally the friend of both the College and the Professor, we most sincerely hope that there will result an amicable adjustment of the present misunderstanding.—Ed. Obs.]

Surgery.

NEW FORM OF FIXED BANDAGE FOR FRACTURES.

Mr. Campbell De Morgan extols (*Med. Times and Gazette*, May 20, 1865,) a simple mode of applying a firm apparatus, described by Dr. L. Hamon in the early numbers of the *Gazette Medicale de Paris* for the present year. Mr. De Morgan and his colleagues at the Middlesex Hospital have used it frequently.

“The material with which the bandage is stiffened is glue, and it should be prepared as follows: The best French glue should be used. It should be broken up and soaked in a little cold water for some hours, and then melted in the usual way in a glue pot, as little water being used as possible. It is not necessary to soak the glue in cold water, but if this is not done it will require the longer heating. When it is to be used, about a fifth part of its bulk of alcohol must be added—methylated spirit answers quite well. At first this converts a great part of the melted glue into a whitish coagulum, but by a little stirring it all liquefies, and is then fit for use. The alcohol is added to induce the rapid drying of the glue—which would otherwise remain soft for many hours, but when mixed with the spirit begins to get firm on the surface very soon after it is applied, and in a short time becomes tolerably firm throughout. It should be applied with a moderate-sized flat hog’s-bristle brush. Supposing that a simple fracture of the leg is to be treated, these are the steps to be taken:—

“The foot should be neatly and firmly bandaged from the toes to the ankle. Two or three streaks of glue along the sides and front will secure the bandage, so that it need not be again disturbed. The leg from the ankle to the knee should then be covered with a very thin layer of cotton wool—not the medicated wool, as it is called, but such as is procured in sheets for lining dresses. Of this a layer not more than an eighth of an inch in thickness can be easily stripped off and smoothly applied to the leg. A cotton bandage should then be rolled very smoothly and with tolerable firmness up the leg from the

ankle to the knee, and well painted over with the glue. Another bandage should then be placed over the first, and the gluing process repeated. A third may then be applied and glued, and then a bandage should be put on over all, and the leg placed in position, and retained, if necessary, by sand bags or junks. Of course, if the surgeon please, he may apply strips of bandage, or of any linen or cotton material he may find at hand, instead of repeating the rolling process. The glue should be laid on freely, and brushed a little into the bandage. In some cases two layers of the glued bandage will be found sufficient. In others it may be desirable to give greater support; but this can always be done as an after-process. The leg should be left at rest for from twelve to twenty-four hours. The glued bandage must then be cut through its whole length. This may be done with the ordinary scissors used for the starched bandage, or a director may be insinuated beneath the bandage and cut upon with a sharp knife. If too long a time elapses before the bandage is cut through, it becomes so hard that great difficulty may be found in cutting it at all. When the bandage is thus slit up, so great is its elasticity that it may have its edges separated sufficiently to allow it to be easily slipped off the leg; and when left to itself will resume its original shape, and this elasticity it will retain for as long as it is used. A strip not more than a quarter of an inch wide, and running the whole length of the bandage, should now be cut off from one edge, and holes punched out parallel to the edges on either side, and about half an inch from them; into these 'œillets' are to be inserted, such as are commonly used in laced bandages or boots.

"The punching and insertion of the œillets are rapidly done with the common instruments used for the purpose, which, with the œillets, can be had at any toolmaker's.

"The bandage is now complete. If it is thought desirable to strengthen it generally, or in any particular part, this may be done by gluing on fresh strips of linen. Its appearance may be improved by gluing on an edging of tape round the top and bottom, and along the sides of the slit. It is re-applied to the leg, and laced up as firmly as may be thought necessary. The lace, if it is not furnished with a tag, is best introduced on an eyed probe, and it should always be passed from without inwards. If the tag is introduced from within, it always gets entangled in the cotton wool, and the process of lacing is extremely troublesome.

"Thus a case is formed which is completely molded in the form of the limb, is very elastic, very firm, and very durable, and which can

be accommodated with perfect ease to all the varying states of swelling of the limb.

“In situations where the roller cannot be conveniently carried round the part, the splint can just as well be formed by laying strips of linen in any direction and gluing them. The cotton wool of course adheres to the first layer of the bandage, and comes off when it is removed. It is applied in the first instance in great measure to keep the glue from contact with the skin.

“The great advantage of this splint is its union of firmness with elasticity. These qualities it retains undiminished for a great length of time. I have found no alteration in these respects during the many weeks that some patients have worn it; a patient now in the hospital has worn it for six weeks, and I find no change either in its firmness or elasticity. At any time it could, if required, be strengthened by a few strips of linen being glued on it.

“I have described it as applied to fracture of the leg, but it can be used in any situation where support is required. Thus I have used it in Pott's fracture, inclosing not only the leg, but the ankle and foot, and have found that it could be slipped on and off with the greatest ease. I have used it in fractured patella, after sprains to the knee and ankle-joints, in diseased knee-joint, and in case of diseased hip-joint, encircling the pelvis and upper part of the thigh.

“Altogether this ‘bandage gelatino alcoolise lace,’ appears to me to be one of the best as well as the most easily applied, and most convenient in its after use, of any of the modifications of Seutin's bandage which have as yet been tried, and it is well worth the notice of surgeons. The advantage which it possesses over others is in its elasticity, which permits of its being widely opened when slit up, without cracking or losing its form. Hence it can be applied as a laced bandage, and may be worn for weeks together, while the patient is moving about, without the trouble of re-adjustment; while it can be accommodated to any change in the state of the limb, through increase of swelling or its diminution, by simply letting out the lace, or taking it in, without even removing the bandage. It is, moreover, very light, and yet strong enough for any purpose to which a splint can be applicable.—*Eclectic Medical Journal*.

RHUS TOXICODENDRON.—Prof. MAISCH says the volatile poisonous principle of the *Rhus toxicodendron* is an acid resembling formic acid, which he proposes to call *toxicodendric acid*.

Miscellany.

DOMESTIC MEDICINE.

BY H. C. ALLEN, M. D.*

Bishop Berkely says: "Effects misimputed, cases wrongly told, circumstances overlooked, perhaps, too, prejudices and partialities against truth, may, for a time, prevail and keep her at the bottom of the well, whence, nevertheless, she emergeth sooner or later, and strikes the eyes of all who do not keep them shut."

How true the aphorism, when applied to the gradual adoption by the public of the new system of medicine, and equally true, I opine, as regards the introduction of family homœopathy. And here arises the long disputed point by many members of the profession—shall we cultivate a domestic practice, or follow in the footsteps of our allopathic predecessors for the last three thousand years? Our predecessors have been conservative to a fault. Shall we follow their example, or boldly strike out a new path for ourselves? Every attempt to popularize domestic homœopathic practice, or enlighten the intelligent public in regard to the simplest truths and primary principles of medicine, has met at the hands of the profession a fierce and most determined opposition. It is evident that such a course of conduct originates, not so much in the interest and advancement of homœopathy, as in the speculation and personal aggrandizement of its professed friends. No wonder that our beloved science should, in her hour of need, be compelled to cry out, "Lord, deliver me from my friends." To introduce domestic homœopathy, is by some of our practitioners considered as little else than a crime of the first magnitude.

But this should not be! It is true that almost all our examples and pre-conceived opinions are opposed to such a course. The Old School for centuries has sedulously endeavored (with a few honorable exceptions) to keep the people in as complete ignorance as possible of the simplest medical truths. And the ignorance of the masses to-day, in all that pertains to the laws of health and prevention of disease, tells but too plainly how completely they have succeeded. If the literal rendering of the word "Doctor" signified in the past, or even in modern times, what it does at present, this should have

* Read before the "Canadian Institute of Homœopathy," Sept. 20, 1865.

been very different. How often, very often, to the earnest inquiries of anxious friends as to the probable cause, course and termination of even the most common-place ailment, do we hear the answer, couched in such high sounding and strictly medical technicalities, that after a lengthy explanation by the Doctor, in which all the minutia of the case is entered into in Greek and Latin, the relief is apparent when the discourse is finished, although they may not have comprehended a single sentence. And it is to this spirit of intolerance everywhere manifested by the profession, to the acquisition of knowledge without its pale, but pertaining to its practice, that we trace the first advent of that bane and disgrace and curse of every school—*quacks and quackery*. It is the same spirit which forced Martin Luther and the Scotch Covenanters to take the first steps in the great religious reformations which they inaugurated, and which finally ended in breaking the iron rule of despotism which had previously held the religious world. It is a part and parcel of the same blind prejudice against which Hahnemann and Harvey and Jenner had to contend, and which is so painfully manifested in the profession at the present day. Neither sound policy nor good sense is shown in such proceedings, which in the end is sure to recoil on the perpetrators of the act, and hasten the event they sought to ward off. I believe homœopathy to be the greatest blessing ever vouchsafed to man by an All-Wise and Beneficent Creator, (the christian religion alone excepted). Hence, I believe it to be the duty of its advocates pecuniarily, commercially, morally and religiously, to disseminate its doctrines in every appropriate and justifiable manner. I contend that we should so place our lamps that they may become beacon lights, illuminating the pathway of the searchers after truth, diffusing from the centre of the circle of our influence its divine rays, which are to benefit mankind, and be a blessing to future ages. My reasons for the belief that is in me are the following, and although they may differ from those held by my aged and more experienced colleagues in the practice of homœopathy, I beg your indulgence for their freedom of expression, with this my only plea. They are my honest convictions, and spoken in a spirit whose only aim is an investigation into their merits, with the view of advancing the cause we love so well.

I. I believe it right, hence I am in duty bound to advocate its introduction.

In obtaining the degrees which license us to practice medicine, the relief of suffering humanity is not our only aim and object. We have an ulterior one in view, praiseworthy so long as kept within proper

bounds. In the majority of cases the leading, all-absorbing and primary inducement to entering the medical profession, viz.: The obtaining of the wherewithal to work our way through life. Any subject bearing directly upon the *commissary* department of our professional labors, should receive a careful consideration from every member interested. Its primary action is upon the pocket, its secondary is somewhat more constitutional. When a professional man cannot earn his daily bread by his best directed efforts, the humanitarian and philanthropic motives which induced him to enter its fields, become to a very great extent a nullity. Hence, I contend that the proper and judicious introduction of "domestic practice," will increase the extent of our field of labor. If there be any province or department in which our beautiful system excels every other extant, it is its extreme simplicity of administration. So harmlessly and effectively adapted to ameliorate the sufferings of mankind, in a quiet, easy and apparently unconscious manner—a far different statement than can be made for any other system of medicine—clearly proving that it is the only one adapted for universal family use. We are not only medical men in the usual acceptation of that term, but something more. We are the exponents of a new system of medical practice, destined to supercede and gradually absorb all others in existence. Our duty is not only to earn a livelihood by our profession, but to disseminate throughout the length and breadth of the land, for the benefit of our fellow men, the principles of homœopathy. In order to successfully accomplish this great desideratum, to establish homœopathy firmly in the opinions of the more intelligent classes, and contribute our quota to the advancement and future destiny of our beloved science, obstacles will have to be met and conquered, and sacrifices made, which few but those who really love our cause are ever capable of making. If it is right for me to practice homœopathy, it is my bounden duty to propagate its principles, and further its advancement in every honorable manner. In the practical application of homœopathy—its introduction into the families of my patrons—I expect to meet with opposition; and the present object of this paper is to have the subject discussed by medical men, so that the most violent and effective opposition will be surmounted, by inducing my brother practitioners to shoulder a part of the responsibility, by undertaking its introduction. That powerful objection so frequently urged, that Dr. A. and Dr. B. do not approve of the practice, that they say it does more harm than good, that wherever it has been introduced it is now wholly abandoned as totally inadequate to meet the demands of the public,

is an argument hard to combat. Our allopathic brethren condemn it altogether, as "trifling with life;" but that is nothing more than they do with our practice in every particular, wherever and whenever they have an opportunity. Every member of this Institute will agree with me in this assertion, that it is more safe and effective by far than Calomel and Jalap, Castor oil and Blue pill, Rhubarb and Magnesia with blisterings and vomitings, and endless purgation. These are the only alternatives to choose, homœopathic domestic practice, and allopathic domestic empiricism.

The people must have something in cases of emergency, especially where they reside at some distance from, and are unable to summon the homœopathic physician of their choice at a moment's warning. And better, far better, trust to a domestic homœopath, than an allopathic "regular."

Again, for every simple disease, as a common cold or a slight diarrhoea, the majority of people do not wish to apply to a physician, and either trust to the curative powers of nature, or appeal to some one of the thousand quack remedies, so profusely advertised throughout the length and breadth of the land.

II. *It is to my interest, the interest of my patrons, the interest of homœopathy, to cultivate a domestic practice.*

This statement may take some by surprise, and to all seem somewhat paradoxical; but it is nevertheless true. During the Cholera epidemic, which devastated so many American cities in 1847, Cincinnati was visited, and here homœopathy obtained one of the most signal victories recorded in the annals of this great reform. And it was mainly due to the skillful management of domestic practice by Drs. Pulte and Ehrmann, that the success was achieved. Every homœopathic family was provided with a few remedies, and complete directions for use in the earliest stages of the disease given, until the physician could be called. In this manner several hundred cases were treated, with a list of mortality much smaller than was ever before known. And I am convinced that Cholera is not the only disease in which it may successfully be used. I have given the subject a great deal of thought, and am satisfied that it is looked upon in a false light by many members of the profession. The chief objectors are those who care very little for the profession, except to make money out of it, and their chief objections arise from the mistaken views they entertain in regard to this particular point, that in a pecuniary point of view there is eventually more money to be made by the proper and judicious propagation of our system, than in the

withholding of everything pertaining to it from the people. The ignorant and unintelligent are not usually the first to adopt homœopathy ; nor do they ever become the firmest advocates of its principles. They are not always ready to settle their bills without disputation, or a very large reduction from the regular charges. They never adopt homœopathy from principle, and seldom support it any longer than the practice is successful in every particular. To me, it is not very satisfactory to attend this class of patients, and the compensation I have received has never been very large. I prefer to follow my vocation among the intelligent, who have enough natural shrewdness to discover that your only object in practicing medicine is pecuniary gain, and who very often, and sometimes very justly, conclude that "*pro bono publico*" never entered the list, and patronize you accordingly. I contend that we are not only physicians in the strictest moral acceptation of that term, but philanthropists and pioneers of a great and glorious reform, destined in a few years, if properly managed, to monopolize the majority of all that is worth monopolizing in every intelligent community.

We must labor for the advancement and future destiny of our cause, and in that manner secure in the end our just reward and true compensation. No man in the history of any reform ever withstood greater obloquy, abuse and persecutions from his professional brethren, than did our illustrious founder ; and seldom have any met with a greater or more enduring monument. If homœopathy was ever intended to benefit the people, its propagation ought, and must necessarily, devolve upon the members of the profession. The people must know of and about it, in order to believe in and adopt it. Hence, it is the personal interest of every practitioner to encourage domestic practice. That we will never receive any assistance from our allopathic brethren in educating the masses, is a foregone conclusion, (as their system flourishes best in ignorance,) therefore, if the work is to be done, *we must do it ourselves*. I am aware that in the attempt we will meet with every species of opposition, even in our own ranks ; that views as opposite as the poles are assumed, are maintained, and advocated by our members. In proof of this assertion I would refer my medical friends to Dr. Pomeroy's article in the N. A. Journal, Vol. 7, No. 25, as a "specimen brick" of the present generation, or to the remarkable sentence left on record by the celebrated French surgeon Ambrose Pare, regarding the future destiny of medicine. "God is my witness, and all good men know, that I have now labored fifty years with all care and pains, in the illustration and amplification of

my art, and that I have so certainly touched the mark wher at I aimed, that antiquity may seem to have nothing wherein it may exceed us, beside the glory of invention, nor posterity anything left but a certain small hope to add some things, as it is easy to add to former inventions." Although nearly three centuries have elapsed since the above was written, although homœopathy has been discovered, put in practice and adopted by thousands of intelligent persons in every land, notwithstanding the flood of light it has shed over the hitherto dark and benighted pathway of medical lore, there are some among us at the present day, who would, if they could, almost prevent the further dissemination of its principles among the people, apparently from motives not altogether praiseworthy. They would confine medical knowledge wholly to the profession, make it, if possible, more strictly professional than their allopathic brethren endeavored to make "old physic," when they nearly killed it outright through mistaken kindness. * * * * *

III. *It forms a nucleus round which the family influence is extended as around a common centre.*

In this world we all exert an influence for good or evil. We cannot become members of society without receiving from it certain impressions, for which we should make some adequate return. And what is true as regards society in general, is equally true in the medical province, where every believer or convert to our principles becomes an advocate and laborer for the dissemination of the same, throughout the circles of his influence. The more you educate such an advocate, the better prepared is he to do battle in our behalf, to meet and combat the various forms of objections offered by his opponents, to set forth the comparative merits of homœopathy, side by side with every other system, which he can do with a far better grace than yourself, as he is not suspected of being pecuniarily interested, but laboring for the good of his friend. A few such assistants is of incalculable benefit to every young man just entering upon the practical department of his profession, and will never injure any, no matter how well he may be established.

The field is already occupied by a learned, powerful and jealous profession. All the posts of emolument and power are at present in their possession, and they appear but too willing to defend them; and as the pioneers of a new medical doctrine, we have a duty to perform to ourselves, to posterity, to humanity and to science, in the propagation of our beloved homœopathy. I contend that the most vulnerable point of our adversaries is in the families of the intelligent, and the

best method of enlisting them in our ranks on the side of *right* and *justice*, is to encourage them in a domestic practice. All the great and liberal minds, whose names appear on the historic page of medicine, the best practitioners the "Old School" have ever given to the world, have sedulously labored to popularize their art. The renegade Peters has spoken and written to the extent of his abilities against the popular practice, but his writings and teachings are in such striking contrast with his practice, that every medical man may place as much reliance on their soundness as the opinions merit, *for he has reaped the reward of his labors*. And whether we, as homœopaths, oppose it or assist it with our best directed efforts, it is destined, sooner or later, to become a part and parcel of almost every household who believe in and practice the truth of *similia*.

And finally, it is a rule in military tactics, that a conquered position should always be fortified, before the returning countercharge compels evacuation. It is of little service to us to make a convert of any man unless we make a permanent one. If a man adopt homœopathy from a conscientious belief in its superiority to combat disease, he should be able to meet his adversary upon his own ground, and with arguments sufficiently convincing to carry off the victory. A man thus armed with the invincible logic of truth, is worth a small army of lukewarm supporters. We should instruct such men, and teach them the "law of similia," until they in turn are able to become its expounders and advocates. Guide their footsteps in the path until they are able to walk alone. They cannot know too much of homœopathy. We should endeavor to popularize our art, and propagate homœopathy by principle, and not by the temporary success of its practice alone. One man, capable of advocating our cause from this higher stand-point, capable of explaining the "*modus operandi*" of our remedies in treating disease, and convincing its opponents of the truth of our therapeutics, is truly an assistant. We should endeavor to unmask our profession of all those things which resemble quackery, mystery and imposition, and place medical knowledge before the public in a light so simple and easily understood, that every student in our Universities should be compelled to acquire it as a part of his Academic course. If our system be true, it is essential to the welfare of mankind, and there are very few so utterly devoid of understanding that cannot be made to comprehend its primary principles. The *law* does not hold a man guiltless who pleads ignorance of the same, but goes on the presumption that every man has a knowledge of the minutia as well as its general principles. And I would ask, Why not in medicine also? * * * * *

For the American Homœopathic Observer.

CASES OF POISONING FROM PETROLEUM.

BY E. C. BECKWITH, M. D.

Case I. A child, two years of age, drank copiously of refined carbon oil, or petroleum, which produced the following symptoms:—Abdomen “wonderfully distended or bloated, the spine bent backward and stiff (opisthotonos), excessive thirst,” &c. Died in six hours *without* medical treatment.

Case II. A negro child, aged two years, drank freely of the carbon oil, Aug. 18, 1865. In thirty minutes abdomen swelled, vertebral column bent backward and stiff, child rational but excessively thirsty.

We gave Ipecacuanha tinct., which produced vomiting. The child threw up oil. (“Struck ‘ile.”)

In six hours we visited it again, and found spine still stiff and bent backward, abdomen remaining tympanitic, eyes staring wildly about, less thirst. We ordered warm bath and Arsenicum.

In twelve hours we found tympanitic removed, spine normal pulse 140 per minute, no thirst, but urine suppressed. We gave Aconite 3d dilution.

Aug. 19. Pulse 130 per minute, urine scant with brick colored sediment and of carbon oil smell. Gave Cantharides 3d.

Aug. 20. Found it much the same, except the pulse, which was reduced to 100 per minute. Continued Cantharides.

Aug. 21. Pulse 80 per minute. Child convalescent.

THE IMPORTANCE OF CASE-WRITING.

Hahnemann, in the *Organon of Medicine*, § LXXXIV.—§ CIV. gives directions for the examination of a patient which have never been surpassed by any writer on practical medicine. He insists especially in the necessity of committing to writing the full particulars of every case. By the majority of homœopathic practitioners his injunctions in this respect have been carefully followed. Some there are who do not take notes, excusing themselves from doing so on the score of the lack of time. We remember well seeing the neatly written out case-papers of the late Dr. Atkin, than whom no one ever more conscientiously conducted so large and laborious a general practice; and yet he told us that he had a report of nearly every case he had attended during the whole of his residence in Hull. Busy as he

was, he found the time to write out all needful details; and more than that, to study each case presenting any unusual appearance, and carefully to compare the symptomatology of the diseases entrusted to his skill with that of the provings in the *Materia Medica*. How thorough was his knowledge of disease, how intimate his acquaintance with the *Materia Medica*, how successful his practice, is well known to all who enjoyed his friendship. One of the secrets of so much power was his *taking notes of his cases*.

The late Sir Benjamin Brodie, in his *Autobiography*, expresses very strongly his sense of the value of note-taking. "My custom," he writes, "has been to take short notes at the bedside of the patients in the day, and expand them with the aid of my memory in the evening. After an experience of fifty years, I am satisfied that no one can be well acquainted with his profession, either as a physician or a surgeon, who has not studied in that manner. It is only by these means that a case can be thoroughly and scientifically investigated, or that that minute and accurate knowledge of it can be obtained, which is necessary to a right diagnosis."

Case-taking is pretty much a matter of habit, and, like most good habits, only acquired after some difficulty, and by dint of patient perseverance. Its value when acquired is incalculable.—(*British Homœopathic Review*).

For the American Homœopathic Observer.

***Æsculus Hippocastanum* in Piles and Constipation.**

BY A. L. L. POTTER, M. D.

Patient, a man of 65 years, light hair and complexion; tall, spare, feeble, phlegmatic. Treated him four weeks with the first decimal dilution of *Æsculus hip.*; a dose night and morning.

He says: "Your treatment has done *that for me* which all the physicians and patent medicines have failed to do for thirty-five years; I am cured."

PROVINGS BY W. H. BURT, M. D.—A physician of the most extensive practice and varied accomplishments says, "*We are very much indebted to DR. BURT for his provings, and cannot too highly commend his zeal.*" We fully agree with him. In some particulars Dr. B.'s labors are open to criticism, and he will be aided in further investigations if kindly directed by abler minds; but low caricature or sharp censure from any one will do no good. There are some men who have never contributed a single proving worthy of notice, who are very ready with reflections and censures.

A SINGULAR CASE.

BY J. M. COMINS, M. D., PALMER, MASS.

I have several times visited Mrs. Sophronia Potter, of Greenfield, Mass., who had been in a very singular condition, resembling very much a person in a natural sleep, for eighteen consecutive weeks; then awoke to a more natural condition, for three days, although far from being normal; then relapsed into the same unnatural sleep for five consecutive weeks, since which time, May 1st, she has been awake daily. She is thirty-seven years of age, has always enjoyed good comfortable health, is about medium size, light sandy complexion, dark auburn hair, dark gray eyes, quite full, in health bright and sparkling, but now have a vacant, timid look; features rather coarse, mouth large, lips a little thick, but all the lines about the face portray melancholy. Not a smile, not a ray of sunshine plays upon her statue-like features. She has a very good evenly-balanced head, with perceptive faculties very large. She has never suffered from the various ills that the female sex are subject to, neither from any spinal affection; has borne three healthy, living children, and recovered well from each labor. While asleep—for I know not what else to call it—the iris of her eye could not be seen; on lifting the lids, the eye rolled so far upward as to hide it entirely. The circulation was sluggish, respiration full but slow. Her bowels were quite inactive, moving only by the aid of artificial means, urine dark and scanty, depositing a brick-dust sediment. She moved very sluggishly, much like one almost insensibly intoxicated or anæsthetised, could bear her weight, if balanced upon her feet, would sit in her arm-chair for hours when placed there; could move her hands and feet a very little. During the first eighteen weeks she took but little nourishment, and that little, liquid food introduced through the teeth, her jaws being firmly set, and left to run back until it came in contact with the glottis; she would then swallow.

When she awoke at the expiration of the first eighteen weeks she said she knew, and related, some things that had been said, and many things she thought had transpired had not actually occurred. Her eyes were very susceptible to the light, and vision much impaired, things appearing at a great distance; sounds also seemed remote. She said it was the judgment of God for some misdemeanor, that was visited upon her, and she could not cast off his wrath. She is now in a conscious state, although unnatural. Says but very little to any one. Eats about one-fourth what she did when well. Her mind still clings

to its earthly home, but tottering on the brink of ruin; the house she lives in has wasted away, and is the dwelling-place of a mind that once was, but now has gone down to decay.

She is about eight months advanced in pregnancy. Her husband says he can trace her lethargy back one year and a half, and she remarked a few days before her attack, that her work was done, and she was going to sleep; and when she awoke, after eighteen weeks, she said her sleep was not through, and slept on. Physicians from various places have visited her, and several have tried to arouse her. She has withstood various tortures, such as slapping the hands and feet severely, running a feather into the nose and rotating it, tickling, &c., together with the shocks of a galvanic battery, producing about the same effect they would have done upon a corpse.

Within the last year she has been very attentive to Church; and at times has been very devout, thinking the Lord was about to chastise her for some unaccountable sin. Her religious belief has been the "Freewill Baptist."

I am informed by an aged worthy physician, who has had the care of the family, that her mother has been subject to fits of hypochondriasis. Two of her sisters have died of phthisis pulmonalis. The females of the family, except Mrs. Potter, have all been Second Adventists, and have been several times unduly excited upon the subject.

From the continued use of the galvanic battery for several weeks, she has become very susceptible to a very slight current.

The motory system seems to be in active play, and obeys its mandate, but where is the mind to govern it? She seems to be far down the "hill of life," worn and toppling under the weight of a century of winters.

Since writing the above she has given birth to a sprightly, active son, (June 24th) but is herself still going down, withering and fading away. The heart still beats; the soul still clings to its earthly tabernacle, but the mind has left its throne.

I will report farther upon the case if anything of interest transpires.—*Eclectic Medical Journal*.

From the Cleveland Herald, Sept. 30, 1865.

A NEW FEATURE IN LIFE INSURANCE.

Within a few days past there has been organized a new Life Insurance Company, with its principal office in this city, having, beside the usual forms of the old companies, a special section to take risks

upon the lives of patrons of Homœopathy at ten per cent. lower premium rates than upon other lives. The following extract from the *London Observer*, (England) will briefly explain the views and objects leading to the formation of this Company :

HOMŒOPATHY AND LIFE ASSURANCE.—The directors of the London Life Assurance office—the “General Provident,”—at its recent meeting, have placed on record their opinion, “that persons treated by the Homœopathic system enjoy more robust health, are less frequently attacked by disease, and when attacked recover more rapidly than those treated by any other system; that with respect to the more fatal classes of disease, the mortality under Homœopathy is small in comparison with that of Allopathy; that there are diseases not curable at all under the latter system, which are perfectly curable under the former; finally, that the medicines prescribed by Homœopaths do not injure the constitution, whereas those employed by Allopaths not unfrequently entail the most serious, and in many instances fatal consequences.” The directors further propose to summon a meeting of the shareholders to lay before them the facts they have collected, and the decision to which they have arrived, namely, “to open a special section for persons treated by the Homœopathic system, at a lower rate of premium than that charged on other lives.”

“The Hahnemannian Life Insurance Company” has been duly organized, under a perpetual charter, with a present capital stock of \$200,000, and the privilege of increasing the same to \$1,000,000. It has a Board of fifteen Directors, selected from among its heaviest stockholders, all gentlemen of the highest standing in Ohio, as business men and capitalists.

No Life Insurance Company in this country has ever started upon a firmer foundation, or with brighter prospects. Although not local in its character or field of operations, our community will look upon its career with feelings of pride.

As to the new and peculiar feature of this Company in regard to kinds of medical practice, we cannot be expected to say much, since we know so little of it. The statistics and tables, upon the figures of which the ten per cent. discount is made in favor of patrons of Homœopathy are not before us. But we can see no reason why Life Insurance Companies should not take into their calculations the *medical* causes that may tend to shorten or lengthen human life, as well as those of *climate, business* or *habits*.

If the chances for the life, or as insurance men say, “the expectancy,” is greater among the patrons of Homœopathy, we can imagine no good reason for their being compelled to pay the higher rates, fixed for such as depend upon more hazardous modes of medical treatment.

For our own part we are glad to have sharp-eyed financiers look

into these questions, that we may attain to some satisfactory knowledge of such occult and generally mystified arts as that of healing. Ultimately we may hope to learn with some good degree of certainty, what is best for us when sick, as we have, for the most part, already learned what ways and means are best for us when well. As yet we venture no opinions upon the new distinctions made in the subjects of insurance by "The Hahnemannian," but shall always endeavor to favor every effort that in any wise promises to elicit knowledge and good for the human race.

Among the stockholders we notice such names as Hon. B. F. Wade, and other prominent men throughout the State.

Of the character and strength of this new company, however, we wish to speak in decided terms, to do which most effectually we present a list of its Board and officers:—

H. M. Chapin, Mayor of Cleveland; Wm. Hewitt, Superintendent Union Line Express Co.; S. L. Mather, Cleveland Iron Mining Co.; E. P. Eells, Vice-President of the Commercial National Bank; J. P. Dake, President of the Dover Bay Grape and Wine Co.; S. R. Beckwith, S. F. Lester & Co., Cleveland; H. C. Blossom, Wm. Bingham & Co., Cleveland; Geo. Sprague, Geo. Sprague & Co., Cleveland; Wm. Edwards, Edwards Townsend & Co., Cleveland; R. F. Paine, Attorney, of Paine & Wade, Cleveland; A. S. Sanford, Sanford & Hayward, Cleveland; W. A. Fisher, H. Garrettson & Co., Cleveland; W. D. McBride, Hussey & McBride, Cleveland; H. G. Cleveland, Cleveland; Brown & Co., Cleveland; James Barnett, Geo. Worthington & Co., Cleveland.

Officers.—H. M. Chapin, President; Wm. Hewitt, Vice President; S. S. Coe, Secretary; J. P. Dake, Actuary; S. R. Beckwith, General Agent; D. H. Beckwith, M. D., Medical Examiner; Paine & Wade, Attorneys.

Executive Committee.—H. M. Chapin, S. L. Mather, D. P. Eells.

MEDICAL TRACTS FOR THE PEOPLE.

I feel there is a positive demand for light for the people, in the shape of tracts or pamphlets, setting forth in simple, plain English, the *history, conquests and triumphs* of the Homœopathic healing art. Our works are most of them too scientific for the common people. Something for the people to read, in regard to what Homœopathy has done, is doing, and is capable of doing, to relieve human suffering and cure disease, will do more for the cause, in my humble opinion, than all the domestic treatises we now have.

A. L. L. P.

For the American Homœopathic Observer.

FŒTICIDE.

The following extract from an argument made by District Attorney Hall, of New York City, in the case of one Dr. Cobell, charged with producing abortion resulting in the death of the mother, is certainly a fine specimen of forensic eloquence. We lay it before our readers under the impression that its solemn warning should be uttered in the ears of especially every young medical practitioner, whose temptations to such crimes are always unusually strong. We desire to say, however, that Mr. Hall's statement in regard to the morals of the Roman Catholic Church on this question, is not well founded. It does not accord with our experience that the members of that church are either absolutely or in an especial degree free from this crime. They may be said to compare favorably with any other religious class, and no more. W.

This crime of abortion grew by the very immunity which some juries had given it from the box in which they sat. It is a fearful occurrence and recurrence in this country—in this large metropolis, and it proceeds from divers causes. In the first place there was a general consent to this crime by the community of wives and women, not proceeding from any depraved instincts. On the contrary, they will often see women who watch tenderly by the cradles of their living infants—who may be, to all intents and purposes, religious women—who literally pour out the emotional wealth of the maternal instinct to their living child, and yet feel no compunctions or remorse at killing their embryo children, by consenting to do that which will bring on the natural consequences of abortion, or by taking medicines under the convenient plea of better health. And why is this? It is just because a sentiment such as the defendant through his counsel preached to that jury, prevailed in this community. They hold that because it is an embryotic foetus, now it has life and now it has not. It is an idea founded on popular ignorance and not depravity, that it is no sin to kill the embryo foetus up to a certain period of gestation, that it is an excrescence that nature says shall be thrown out of the body. This doctrine is not only founded on popular error, bolstered up by superstition and preached by men like Dr. Cobell, but it is sometimes listened to by juries.

And then there is another reason why abortion is so frequent, and that is precisely for a like reason that there are so many thieves. Destroy the great army of receivers, and you paralyze the thieves, because then the thief would have no place to take his booty to. Con-vict, hang and shut up your Dr. Cobells, and where shall the women go to carry out this popular superstition and ignorance, which, after all, is not so much in them depravity, as it is in those who minister to their ignorance and their superstition. It is to the everlasting honor

of the Catholic Church, that from its commencement down to the present time, it has been one of the inherent dogmas of that Church, that from the very moment of conception, there is the impress of the Almighty upon the foetus; and whoever shall lay his finger upon it, commits as much murder as if it were laid on a full-grown man, and he was stricken down to the earth by the red hand of malice aforethought, which the law calls murder—and rightly so. There, hidden in the recess of nature—aye, in the very shop of nature, with all the beautiful handiwork of the Almighty surrounding it—lies something which is in the process of manufacture—a casket which shall contain a soul. When does that soul get there? Talk of the first manifestations of intelligence in a child—that that is the soul—that on some certain day, varying in different individuals, the Almighty imparts the soul to the embryo or foetus, which is to be distinguished by medical art and science. No, says the Church and says the law—we will not speculate about these things. From the very moment of conception there may be a soul; existence of vitality and manifestation of it are two different things. You hold your child in your arms when it is a day or an hour old. It lies there, almost an inert mass of matter—certainly not containing as much intelligence as the little dog that capers around, sharing in the general joy; and there it lies, day after day, crying and moaning until some day a sudden light spreads through the household—the child recognizes somebody; it, for the first time, develops that it has got something more than dull animal life, and has a soul then, and from that day, as time rolls on, it grows in the greatness of goodness or the meanness of depravity. And who will say that in the smallest embryo, when it has ceased to be an ovum, there is not an impress of vitality which is not a portion of the dawning soul? Therefore, it is an everlasting honor to the Roman Catholic Church, that it has impressed that dogma on its scheme of mortality. And if the jury's experience had extended, they would not have failed to notice that no man or woman connected with that Church, ever aided, abetted or suffered abortion. (?) When the whole community shall become impregnated with this dogma—not using the phrase in an offensive sense, but with this great truth—when this popular superstition and ignorance has rolled away before the example the jury shall have set by their verdict, our Dr. Cobells shall have ceased to flourish in this community, the dens of the abortionist shall be closed to ignorant women who come to them; then this truth shall be manifested, and then you and I and others, through this and kindred cases, will have discharged the duty we owe to humanity. It is not alone a crime done to the foetus when it is destroyed, but it is a crime against gestation—against the constitution—against citizenship.

Mr. Hall went on to say: Whenever this old man shall end his natural life—whether by the arm of the law, his own hand or by the hand of God, and shall even obtain a sight of the number of victims inscribed on the recording book he has sent to the next world, how many will be there, how many might there not be, under circumstances like these? It is a problem you can work out for yourselves. Give me a girl who wants to hide her shame, and give me a notorious abor-

tionist, cute and scientific ; give me a woman surprised or frightened and who is anxious to cover up appearances, and relatives anxious also, and you have opportunity of accomplishing just such things as this in secret. What says his law book upon abortionists ? During the eight years from 1840 to 1848 there were thirty-two trials for abortion in Massachusetts, and not a single conviction ! Newspapers once in a while abuse the District Attorney because he does not try certain indictments for abortion. Will the newspapers be kind enough to come and give me their testimony necessary to convict ? It is because the surroundings of these crimes so cover up their traces, that there are so few convictions—it is so easy to destroy the evidence and it is so easy to put the veil of science between the public prosecutor and the jury box.

And now as I am about to commit this case to you, let us see something about the girl, and her relation to this monster. I speak on the evidence. You do not need to go to a circulating library to borrow a romance ; you do not need to go to the theatre to see a tale of woe and horror, when dramas like this, which is about to pass into history, is being enacted in our midst. A young girl, eighteen years of age, unmarried, a nurse in a family, unknown to her parents and relatives, is pregnant. She had some pride left even if she had been diseased two years before. Her shame was known to the father of the child and to herself. Counsel then went on to describe how Miss Wolfer went to the house, in Columbia street, and engaged rooms there, and sent for the prisoner to prescribe for her in her then condition, and argued therefrom that the evidence showed the medicines he prescribed on the Monday did not work, and so he went there again on the following Wednesday, and there produced the abortion with instruments. After having done that he threw the possible casket of a human soul into the common sewer ; the casket of a soul to become part of the common filth and increment of the city life—to be gambolled over and eaten by rats and mice—to be washed out into the great river, as he had washed out that life to the great river of immortality, forever and forever.

We cannot (continued Mr. H.) escape the natural inference arising from this. When he took away the child she called it a baby ; she had pride to conceal her shame, and fallen though she was, she had some little maternal instinct in her which is so loveable, and she says, "What are you going to do with my little baby—bury it ?" and the Doctor said, "I will." After that piece of evidence it was well that the defence agreed with us, that notwithstanding what Hoffman said, we should not touch her scornfully ; that we should think of her mournfully, gently and humanely, and not of her offence, for all that remains of her is pure and womanly ! Yes, she has passed all dishonor, and death has left on her only the beautiful. We are to deal with him, who, usurping the province of Omniscience, sent her to an untimely grave. Something is going on in that room ; all the evidences of the crime are nearly obliterated, and Mrs. Crossen is shut out. Well, into the chamber from whence the angel of death had issued, comes the minister of justice. Who did this foul deed ?

Who fouled not only the soul of an immortal child, but also that of a mother, and polluted her person? Where is he?—at her feet, cringing, asking forgiveness for past offences? No; glorying in it—"I threw that foetus down the sewer." Cobell is found by the bed-side of this murdered girl; "I want you," says Justice. She brings him to the prison, and she brings him to the coroner's inquest, and she brings him to this court room. Here he is before you, and here, in this sacred temple of justice, I stand pleading as if it were for my heart's blood, in behalf of my clients, the people of the State of New York, calling upon you, as ministers of justice who will deserve well of your fellow-citizens, if by your verdict of conviction you give an example that will be heeded in the palaces of the wealthy and in the hamlets of the poor.

HOMŒOPATHY IN THE FRENCH SENATE.

Some sensation has been excited in Parisian Medical circles by the presentation of a petition to the Senate, nominally on the part of five *ouvriers*, demanding that Homœopathy should be introduced into the Hospitals. In that august body such a demand will, doubtless, as it would among our own legislators, meet with many sympathisers, and a committee has been appointed to report upon it. Senator Dumas, the distinguished chemist, has been chosen as the Reporter, and although the fact of his being a physician certainly did not procure him the post he holds in the assembly, it will enable him to discharge the present duty with advantage to the community. The committee, before coming to its decision, has also appealed to the Administration of Public Assistance for its advice, and M. Husson, the Director of this, is said to have transmitted an extensive and decisive memoir on the subject. The professional view of such a demand will, therefore, probably be satisfactorily developed; but we are somewhat surprised to find a writer usually characterised by great rectitude of views, M. Latour, maintaining in the *Union Médicale* that the proper mode of meeting the advances of homœopathy is to admit its pretensions, secure that in the long run, whether as teachers or practitioners, its votaries will exhibit their nothingness. "To bring discredit on their procedures, admit them freely to your chairs and your Hospitals; while if you wish to increase their importance, submit them to martyrdom and persecution." We had thought that a sufficiently long trial had, in various parts of the world, been accorded, and that the verdict returned was well-nigh unanimous; and however little compassion we may feel for any of the consequences ensuing upon the vagaries of fashionable frivolity in Medicine, we must protest against those who

have in their hands the grave responsibility of providing for the wants of the poor and ignorant, trifling with this and coolly handing them over to a set of visionaries, as if the result were a mere matter of speculative curiosity in place of being always a question of health and strength, and often of life itself. (*Medical Times and Gazette*, June 17th, 1865.)

Our opponents seem to have dropped their allusions to the "convincing trials of homœopathy, by M. Andral," especially since M. Andral himself has repudiated these trials as being in any way convincing. They now prefer to deal in safe generalities like the author of the above, and speak about trials of homœopathy in various parts of the world. Perhaps the editor of the *Medical Times and Gazette* will kindly favor us with the names of the "various parts of the world" where the long trial of homœopathy has been accorded, with a well-nigh unanimous verdict. We know that a long trial of homœopathy has been awarded in various hospitals in Austria and Hungary, that in Paris r. Tessier gave it a pretty long trial in the various Hospitals he was connected with, that several Hospitals in America, not to mention the special Homœopathic Hospitals in London, Manchester, Doncaster, and Bath, have all awarded it a trial of greater or less length, and we likewise know that not only a well-nigh, but an absolutely unanimous verdict has been pronounced by these various institutions in favor of homœopathy. But these trials and this verdict are probably not what the writer alludes to. If he knows of any other trials issuing in any other verdict, now is the time to produce them, and we call upon him to do so. We need hardly say that we quite agree with Dr. Latour in wishing the petition of the five *ouvriers* granted, though we are confident that the result of granting the petition will be exactly the opposite of what the worthy doctor expects to happen and that no discredit will be brought on our procedures thereby.—*British Journal of Homœopathy*, July, 1865.

PRACTICAL MEDICINE IN EUROPE.

Many suppose that the practice of medicine is very nearly the same in all countries, but in this they are very much mistaken. There is but little difference in the practice of surgery, but in practical medicine the difference is very marked. In England, up to a period twenty years back, the practice was the same as in this country, as our practice was principally derived from English authority. But recently a very marked change has taken place. The old idea of an

excess of something to be reduced by antiphlogistic treatment, has given way, and instead, almost all the later authorities claim that disease is a manifestation of imperfect or lowered vitality, and best treated by rest, diet, restoratives, tonics and stimulants. As the result of this change, there has been a remarkable diminution of the death rate in disease, which, if there was no other evidence, would be conclusive as to the correctness of the reasoning. The modern English physicians have also paid much attention to the development of new remedies, and new uses for old ones, thus very much increasing their resources. Thus they have adopted quite a number of those which we claim as peculiarly our own, and give strong testimony as to their value.

We know less of practical medicine in France, though it differs very materially from their brethren across the channel. As an illustration of the opinion the English hold of their neighbors, we may quote from the testimony given by Dr. Quain, before a committee of the House of Commons, Mr. Roebuck being the questioner :

In order to prevent accident and ignorance, would it not be a good precaution that a prescription should be written in English ?

Ans. The patient would not take it in nine cases out of ten, if he knew what it was.

Do you know in France all prescriptions are written in French ?

Ans. It is often illegible French ; and, moreover, the thing prescribed does but little good or harm.

Is that your opinion of French physicians ?

Ans. From experience, I can say, that the French prescribe what does very little good, and certainly does very little harm.

And you think a great advantage is derived from keeping the patient in ignorance of what he takes ?

Ans. Immense advantage.

I should like to see the answer of *Johnny Crapeau* to this snarl of Mr. Bull. It would doubtless be a retort courteous. The French employ many simples in the treatment of disease, and depend much upon the natural powers of the system, two things repugnant to the mercurial fossils of which Dr. Quain may be taken as a type.

In Germany great attention has been paid to physiology and pathology, and therapeutics somewhat neglected. The expectant plan of treatment is most in vogue at the principal schools, and the practice of the masses is confined to a great extent to simples as in France. Yet the German practice is many times a good one, and it is a source

of regret that we cannot avail ourselves of the experience of their physicians.

In Russia the practice is a combination of German simples with the old English mercurial, and is not very successful. Still it is progressive, and at no distant day we will find them adopting the opinions of the English liberals.—*Eclectic Medical Journal*.

VENTILATION IN FEVER.—Dr. MacCormac, of Belfast, thus writes on this subject to the *Dublin Medical Press*: “If Dr. Kennedy will come to Belfast, I will show him hundreds, if not thousands, of persons, of both sexes too, myself inclusive, who keep their windows open all night through, in all seasons, and with every possible advantage. I kept the windows entirely out during the treatment of Cholera, and with the utmost benefit. I never treat a case of fever, at whatever period of the year, without opening the window and keeping it open day and night—a degree of exposure which Dr. Henry Kennedy affirms to be impossible. Persons in fever do not commonly labor under cold and livid feet, with cold breath and pulseless wrists. The hot stage is of a certain duration. There are also hot months in the year, during which the absence of ventilation entails, if possible, yet greater evils than during the cold. I never found the least difficulty in maintaining warmth along with open windows in fever. It is a perfect matter of notoriety, that fever cases by the roadside recovered oftener and better than in hospitals with the closed windows. Dr. Kennedy says he does not see how wards are to be kept dry. To which I reply, it is simply by not wetting them.”

LETHARGY.—At the last sitting of the Academy of Sciences a paper was received from Mr. Blanchet, on three curious cases of constitutional lethargic slumber. One of them was that of a lady twenty-four years of age, who, having slept for forty days at the age of eighteen, and fifty days at the age of twenty, during her honey-moon, at length had a fit of sleep which lasted nearly a whole year, from Easter Sunday, 1862, to March, 1863. During this long period a false front tooth had to be taken out, in order to introduce milk and broth into her mouth. This was her only food; she remained motionless, insensible, and all her muscles were in a state of contraction. Her pulse was low, her breathing scarcely perceptible; there were no evacuations, no leanness; her complexion was florid and healthy. The other cases were exactly similar. Mr. Blanchet is of opinion that in such cases no stimulants or forced motion ought to be employed.

HALE'S NEW REMEDIES.—(NEW HOMŒOPATHIC PROVINGS.)

My health not permitting me to lecture the ensuing months of this year, I have set about collecting additional material for the *Second Edition* of "New Remedies." It will be ready for the Press about the first of January.

Proving or partial provings of any plant indigenous to United States will be acceptable, also clinical reports. If any physician will report to me his experience with one or more remedies, and send such report before the above date, it shall be published and due credit given. In reporting cases please observe the following rules :

I. Give the symptoms cured, *especially the characteristic ones*.

II. Report only those cases where the remedy was used singly and alone.

III. Give the size of the dose, and the time of its repetition.

IV. Write plainly, and only on *one* side of the sheet.

All reports, etc., may be sent to my address, *Box 550, Chicago, Illinois*.

E. M. HALE.

PUBLISHER'S NOTICE.

Dr. Hale, much to the regret of himself and others, has been obliged to avoid public speaking for a few months, in order that he may recover from the effects of an illness elsewhere referred to. In the interim, as the first edition of New Proving is exhausted, he will devote his time until Jan. 1, in collecting additional material for a second edition, which will contain all the new clinical experience, and later provings of the New Remedies. The new edition will be printed as rapidly as due care will permit.

Presentation copies will be bound in substantial leather binding, and sent *free* to all contributors of provings on clinical cases for the new edition, and the names of all the principal contributors placed upon the title pages. Articles should be sent to Dr. Hale before 1st Jan., 1866.

EDWIN A. LODGE, *Publisher*.

Colleges and Societies.

For the American Homœopathic Observer.

ONEIDA CO., (N. Y.) HOMŒOPATHIC MEDICAL SOCIETY.

The ninth Annual Meeting of this Society was held at Bagg's Hotel, in the city of Utica, on Tuesday the 17th inst. The meeting was called to order at one o'clock, P. M., by the Vice President, Dr. S. O. SCUDDER, of Rome.

After calling the roll, the Secretary read the proceedings of the last meeting, which, on motion of Dr. MUNGER, were approved.

On motion of Dr. WELLS, the usual order of business was suspended, and the members proceeded to elect officers for the ensuing year, which resulted as follows :

For President, Dr. S. O. Scudder, of Rome ; for Vice President, H. Willis, of Clinton ; for Secretary and Treasurer, M. M. Gardner, of Holland Patent ; for Censors, Drs. L. B. Wells, J. C. Raymond, C. J. Hill, and W. H. Watson.

For Delegates to State Society—J. C. Raymond, S. O. Scudder, W. B. Stebbins, and H. Willis.

Delegates to the Madison County Homœopathic Medical Society—Dr. L. B. Wells and H. Willis.

Delegates to the Cayuga County Homœopathic Medical Society—Drs. S. O. Scudder and M. M. Gardner.

Delegates to the Oswego County Homœopathic Medical Society—Drs. J. C. Raymond and Wm. H. Watson.

Delegate to the Otsego County Homœopathic Society—Dr. N. Spencer.

Delegates to the Onondaga County Homœopathic Medical Society—Drs. A. E. Munger and L. B. Wells.

Committee on Publication—Drs. S. O. Scudder and M. M. Gardner.

Next in order came the appointment of committees on voluntary communications :

Dr. S. O. Scudder, Thoracic Diseases.

Dr. E. A. Munger, Typhoid Fever.

Dr. L. B. Waldo, Intermittent Fever.

Dr. Wm. Landt, Pertussis.

Dr. H. Willis, Typhus Fever.

Dr. W. Warren, Dysentery.

Dr. S. A. Paine, Diseases of Women.

Dr. W. H. Watson, Diphtheria.

Dr. W. B. Stebbins, Cephalagia.

Dr. L. Bishop, Theory of Homœopathy.

Dr. A. Guiwits, Pneumonia.

Dr. L. B. Wells, Paralysis.

Dr. J. W. Moyer, Diphtheria.

Dr. H. Hadley, Professional Etiquette.

Dr. C. J. Hill, Chronic Diarrhœa.

Dr. J. C. Raymond, Hectic Fever.

Dr. M. M. Gardner, Typhoid Fever.

Dr. Wells read a report on the causes of Paralysis. He reported several cases that had come under his observation, showing quite conclusively that a partial paralysis of the muscles of the arm may be produced by the long and constant use of metallic pens and penholders.

Dr. Scudder read a report on "Surgical Diseases of Soldiers." He gave the history of several cases that had come under his observation as examining surgeon for invalid pensioners, showing the

effects of gun-shot wounds through different parts of the lungs. The report was listened to with interest.

The remainder of the afternoon was taken up in the discussion of the treatment of dysentery, in which nearly all the members present took part.

The Society then adjourned to meet at its ninth Semi-Annual Meeting, at Stanwix, hall, in Rome, on Tuesday, the 19th day of June, 1866, at 11 o'clock A. M.

M. M. GARDNER, *Secretary*.

For the American Homœopathic Observer.

HOMŒOPATHIC MEDICAL SOCIETY OF WISCONSIN.

At a meeting of Homœopathic physicians held at the office of Dr. Dale, in the city of Oshkosh, Oct. 18th, 1865, present, Drs. Pearce, Moore, Page, Patchen, Ober, Dale, Clark, Storke and others, Dr. Pearce was called to the chair, and Dr. Dale appointed Secretary *pro tem*.

On taking the chair, Dr. Pearce made some very happy and appropriate remarks, after which Dr. Patchen addressed the meeting, and moved that a "State Society" be organized, which was carried.

Drs. Ober, Patchen and Dale were appointed a "Committee of three by the Chairman, to report on name, Constitution and By-Laws," which committee reported the following name: "Homœopathic Medical Society of Wisconsin," which was unanimously adopted. Also a Constitution and By-Laws which were adopted.

After a dinner at the Adams House, they proceeded to examine the abnormal growth of the head of a child of Mr. Milmore, which all agreed in calling most remarkable.

Society called to order again at 2½ P. M.

On motion, proceeded to elect officers for the ensuing year, which resulted as follows:

Dr. F. J. Patchen, of Fond du Lac, President; Dr. S. E. Ober, of La Crosse, Vice President; Dr. H. B. Dale, of Oshkosh, Secretary; Dr. P. Moore, of Nenah, Treasurer, and Drs. Pearce, of Green Bay, M. F. Page, of Appleton, and G. R. Swetting, of Berlin, as Censors.

The following Committees were appointed to report in full at the next session:

Dr. Pearce, Venereal Diseases.

Dr. M. F. Page, Diphtheria and its sequelæ.

Dr. T. J. Patchen, Typhoid Fever.

Dr. H. B. Dale, Infantile Pneumonia.

Dr. P. Moore, Scarlatina.

Dr. L. E. Ober, Dysentery.

Dr. G. R. Swetting, Diseases of Children.

Dr. Babcock, Cutaneous Diseases.

On motion Dr. Dale was instructed to procure photographs of Mr. Milmore's child, at expense of the Society, with a view to furnishing the members of this Society, and others, each with a copy.

On motion, *Resolved*, That this Society cordially invite the students of this State to participate in their discussions and scientific writings.

On motion it was voted to send a copy of the proceedings of this Society to the *Medical Investigator*, *American Homœopathic Observer* and *Western Homœopathic Observer*, for publication.

Adjourned to meet at La Crosse the third Wednesday in November, 1866.

H. B. DALE, M. D., *Secretary*.

T. J. PATCHEN, M. D., *President*.

Cleveland Homœopathic College and Prof. E. M. Hale.

We are happy to be able to announce that the difficulty referred to in our last number has been arranged. Dr. Hale has been suffering from hæmorrhage from the lungs, cough, &c., and cannot even now speak for over ten minutes without suffering. In such a condition he could not lecture at Cleveland, and may be able to do but little at Chicago. The Doctor may have erred in permitting an announcement that he would lecture at Chicago before he resigned at Cleveland, and the Faculty of the Cleveland College were probably mistaken in supposing that Dr. Hale acted in bad faith.

The Professorship of Materia Medica will be well filled by Dr. G. W. Barnes, and it is very gratifying to find Dr. Hale speaking of Dr. Barnes as he does in a letter received to-day, (Nov. 4th):

"Dr. Barnes is a valued friend of mine, and my regret at not being able to lecture in that Institution, is mingled with sincere pleasure in knowing that they have secured the services of a man as scholarly and talented as I know Dr. Barnes to be. His is one of those minds that will never go backward, but will keep pace with the advance made in all branches of medical science. If his life and health is spared he will prove a valuable teacher in the chair of Materia Medica. I assure you I am proud of having such a man as a colleague in the department of medicine which I love so well."

VALEDICTORY.

On the third of October, 1860, a Convention of the Homœopathic Physicians of the State of Michigan was held at Detroit, at which meeting a State Society was organized, which is now in successful operation. We were at that time appointed a committee on the publication of a State Homœopathic Journal. No adequate support being offered, the project was abandoned. We had several very good Journals, yet were convinced that there was a promising field for usefulness still unoccupied. We did not like the idea of a publication for the sake of mere local interests, and aimed at greater usefulness. Two years ago we sent out the first number of the "*American Homœopathic Observer*." It was a mere experiment, was sent out without any cover, but with a promise that if the subscriptions should cover the cost of printing, we would exclude advertisements from the body of the Journal, and insert them in a cover that could be thrown aside

in binding. To our very great gratification cash subscriptions and acceptable communications came in rapidly. From that time our progress has been steady. New subscribers and new writers have been received almost every week, until we now have a circulation larger than any other homœopathic periodical in the United States.


The extraordinary success which has attended the publication, is principally to be attributed to the valuable corps of Contributors it has secured, which has enabled the Editor every month to present matter of value and interest to all practitioners of homœopathy.

The services of quite a number of other excellent writers have been engaged, and it will be the aim of the publisher to give to the profession the largest, cheapest and best Medical Magazine published in the United States.

The AMERICAN HOMŒOPATHIC OBSERVER will continue to notice whatever is passing in the medical world that may appear to be worthy of observation, and faithfully record new provings and improved modes of treatment. Pledged to the support of no particular College or party, its pages will be open to all who can present views calculated to advance our beneficent art of healing. Articles which evince a captious or hypercritical spirit, will be excluded, as heretofore, no matter how well written or who may be the writer; but no article will be rejected simply because it may not accord with the views of the Editor. The utmost freedom of discussion will be allowed that is consistent with the character of the publication. Articles containing information which can aid the physician in active practice, although indifferently written, will always be preferred to papers of a higher literary character, that are mainly theoretical or controversial.

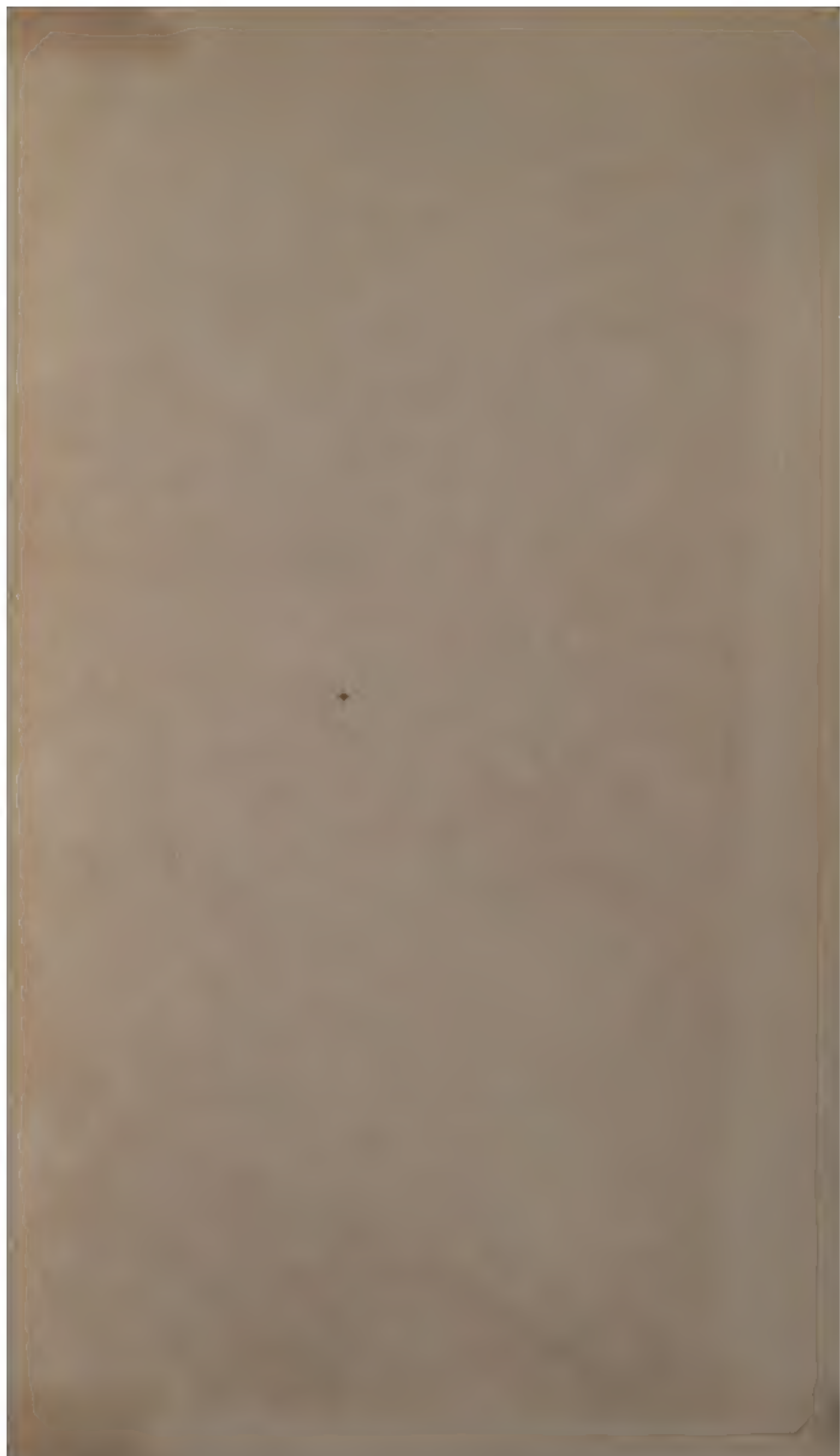
We feel very grateful to all who have written for our pages. We ask a continuance of their favors. We hope that all of our readers will remember that we shall always be glad to hear from them whenever they have anything to communicate that is at all likely to be interesting or instructive to the general practitioner. We desire also to thank our friends for the promptness with which they have sent the subscription price of the Journal. We have not been obliged to disfigure our pages during the year with even a hint to subscribers that they have forgotten us.

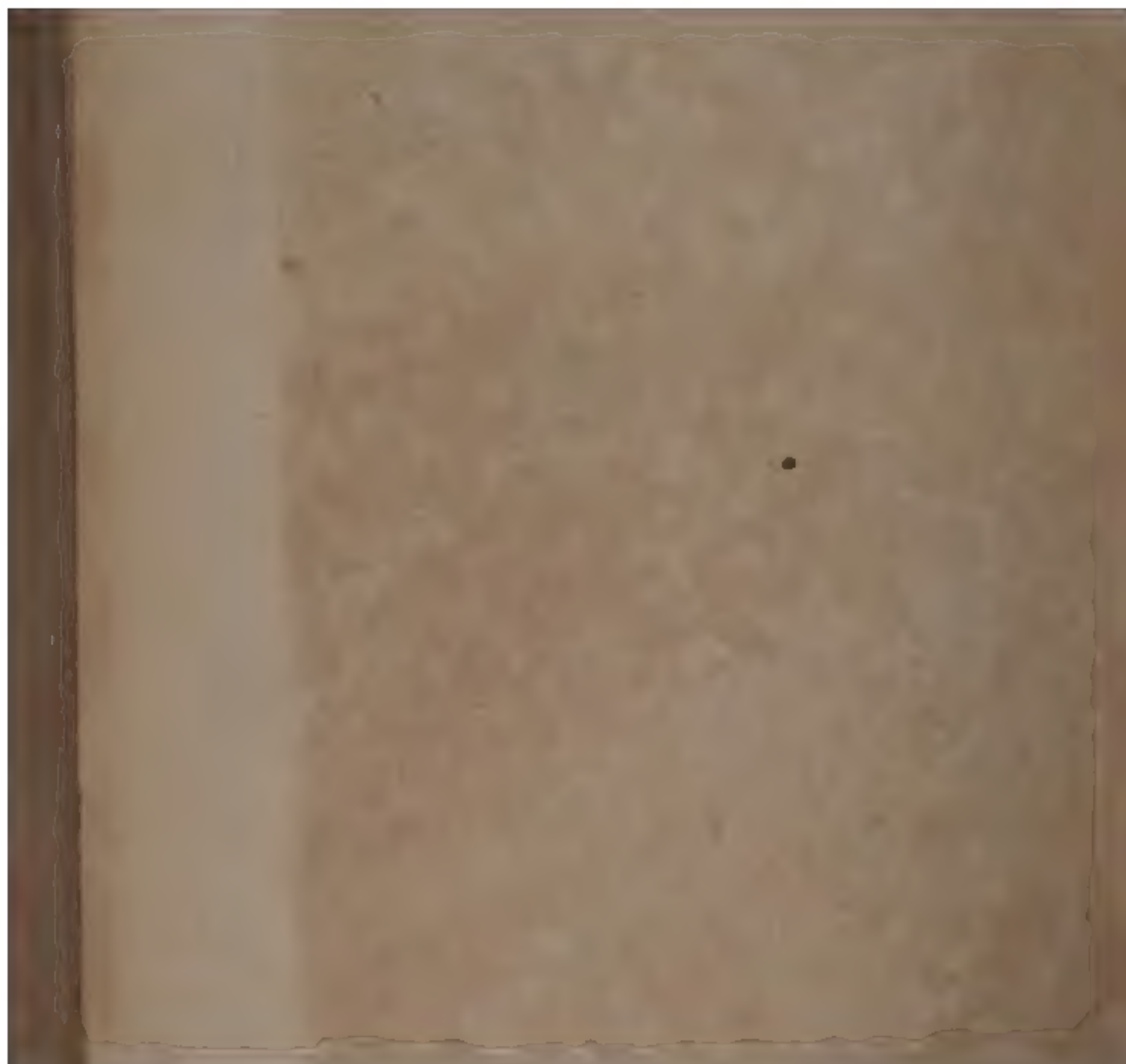
Hoping to present our Magazine for the next year on better paper, enlarged in size, and improved in every department, we present our fraternal regards to all our readers.

 Homœopathic physician wanted at Hubbardstown, Mich.
Address Messrs. Sunderlin & Corey, Hubbardstown.









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